

# Transforming Youth Recovery

One Community, One School, One Student At A Time

## 2017 Census and Definitions for Recovery Support in Higher Education

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# INTRODUCTION TO TRANSFORMING YOUTH RECOVERY

At Transforming Youth Recovery (TYR), we approach every effort from a capacity-building perspective. Our intention is to help communities of people find and put into practice those things that can allow everyone to live their best lives. Specific attention is given to those at-risk for substance use disorders or misuse. The 2016 National Survey on Drug Use and Health found that an estimated 28.6 million people aged 12 or older used an illicit drug in the past 30 days, which corresponds to about 1 in 10 Americans overall (10.6%) but ranges as high as 1 in 4 for young adults aged 18 to 25. Additionally, in 2016 about 1 in 5 underage individuals aged 12 to 20 were current alcohol users. About 7.3 million people aged 12 to 20 reported drinking alcohol in the past month, including 4.5 million who reported binge alcohol use and 1.1 million who reported heavy alcohol use. This reflects a public health issue that we are looking to address without hesitation.

Our studies seek to find those effective prevention, intervention, and recovery practices that we should be calling upon more often, in more places, with greater consistency. When we find places where such practices live and breathe, we commit to rapidly spreading that knowledge so that connected networks can take collective action.

In all we do, we stay ever mindful that change happens one community, one school, one student at a time.



# EXECUTIVE SUMMARY

The research undertaken by Transforming Youth Recovery for the *2017 Census and Definitions for Recovery Support in Higher Education* includes activities intended to update definitions and descriptions for the services and resources that directly support students in recovery at institutions of higher education. A census was undertaken to ascertain the number of known institutions offering services and resources in the U.S. along with detailed information on services and resources available to students on college campuses.

The specific research objectives were defined as:

1. Substantiate the assumption that institutions of higher education are offering diverse types of recovery support services and resources for students in recovery from substance use disorders.
2. Offer a definitional framework for the diverse types of recovery support services and resources in order to strengthen resource classification within the field and enhance accessibility by students and families in need.
3. Update census data on collegiate recovery services and resources currently in the U.S.

The collegiate recovery census was sent to 249 contacts and promoted via TYR's social media channels. Responses were received from 183 individuals. 127 responses were complete enough to include in the survey analysis and 118 unique institutions of higher education provided responses.<sup>1</sup> These response rates make this the largest census in the history of the field.

The research successfully substantiated the assumption that institutions of higher education are offering diverse types of recovery support services and resources for students in recovery from substance use disorders by examining three variables: (1) definition, (2) area of focus, and (3) additional practices.

### 1. Definition

59.84% of respondents indicated they were offering a Collegiate Recovery Program, 37.8% of respondents indicated that were offering a Collegiate Recovery Community, 28.35% indicated they were offering Recovery Support Referral, and 11.02% indicated they were offering a Collegiate Recovery Residency Program. Additionally, less than 1% of respondents indicated they were offering a Transitional Living/ Recovery Housing and Education Program, a Young Adult Intensive Outpatient Program (IOP), or a Treatment and Education Program. This variation in definitions was the first step in substantiating the assumption.

### 2. Area of focus

87.40% of respondents indicated peer support as an area of focus, 34.65% indicated counseling or clinical support as an area of focus, 74.02% indicated social activities and sober fun as an area of focus, and 22.05% indicated other as an area of focus. Again, the variation in responses helps to substantiate the assumption that institutions of higher education are offering diverse types of recovery support services and resources for students in recovery from substance use disorders.

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1. Researchers continued to follow-up with colleges and universities after analysis of survey responses was completed in order to get the most accurate data and count of services possible. At the time of publication 136 unique institutions had responded to the census. Any data provided will be used to update online resource data sets available at <https://www.transformingyouthrecovery.org/areas-of-focus/recovery-in-higher-education>; however, the response data from the 18 additional institutions was not included in the survey analysis.

## 2017 Census and Definitions for Recovery Support in Higher Education

### 3. Additional practices

Survey respondents were provided a list of 24 additional practices and prompted to select all that apply. Across the 112 institutions that provided a response to this question, 1217 selections were made.

On average, institutions selected 10.87 additional practices they were offering. The most consistently selected additional practices included (1) Coordinate events to raise awareness on campus, (2) Organize sober social events for the recovery community and beyond, and (3) Advocacy efforts undertaken for student needs; over 70% of respondents indicated they were offering those practices. The least common practices selected by respondents included (1) Offer relapse training to staff and students and (2) Mentor high school students in recovery; less than 15% of respondents indicated they were offering those practices. Again, the variation in responses that can be observed below substantiate the assumption that institutions of higher education are offering diverse types of recovery support services and resources for students in recovery from substance use disorders.

Additional practices	#	% (N=127)
Advocacy efforts undertaken for student needs	90	70.87%
Arrange for access to gyms, sports facilities, or intramural activities	18	14.17%
Arrange for seminars, classes, or academic advising for students	39	30.71%
Connect to job-placement, internship, and career-day programs	18	14.17%
Coordinate events to raise awareness on campus	94	74.02%
Facilitate life skills workshops	42	33.07%
Give presentations on recovery resources in the community	55	43.31%
Have a registered student organization or club	64	50.39%
Have advocacy, advisory board, and/or coalition meetings	38	29.92%
Host on-campus 12-step or other mutual aid support groups	84	66.14%
Keep consistent drop-in hours	49	38.58%
Mentor high school students in recovery	9	7.09%
Offer relapse training to staff and students	16	12.60%
Offer peer mentoring support	64	50.39%
Organize sober social events for the recovery community and beyond	92	72.44%
Plan activities with students' families (e.g. parents' weekend)	22	17.32%
Promote community service and other volunteer opportunities	57	44.88%
Provide professional counseling	42	33.07%
Provide recovery workshops (e.g. spirituality, meditation, 12 steps for self-compassion)	46	36.22%
Schedule group meetings other than formal/clinical support group meetings	54	42.52%
Set recurring recovery group events (e.g. sober birthday celebrations, weekly dinners, etc.)	51	40.16%
Staff and students attend conferences	69	54.33%
Staff-led outings off-campus	44	34.65%
Student-led outings off-campus	52	40.94%
Other	8	6.30%

Table 1. Additional practices.

## 2017 Census and Definitions for Recovery Support in Higher Education

The research also offers a definitional framework for the diverse types of recovery support services and resources in order to strengthen resource classification within the field and enhance accessibility by students and families in need. Draft definitions were provided via the census and respondents were asked to select a definition that best described their services and resources. Respondents were also prompted to provide feedback on the definitions. The draft definitions included the following:

1. **Collegiate Recovery Community** – Emergent efforts by students in recovery from substance misuse or dependency to create safe, supportive learning environments at an institution of higher education. The primary components of collegiate recovery communities are:
  - Mutual aid support groups near or on campus for students in recovery and students or other committed individuals who gather together socially, participate in sober activities; and,
  - Peer recovery support in a community setting.
2. **Collegiate Recovery Program** – Programs offered at institutions of higher education that provide safe, supportive learning environments for enrolled students in recovery from substance misuse or dependency. The primary components of collegiate recovery programs are:
  - Mutual aid support groups near or on campus for students in recovery;
  - Physical space for students to gather together socially, participate in sober activities, and experience peer recovery support in a safe environment;
  - Institutional acceptance and support of the collegiate recovery program and the academic goals of students in recovery;
  - Staff, counselors, or student leaders who are dedicated to the collegiate recovery program; and,
  - Peers, recovery coaches, or counselors who are available for recovery support.
3. **Collegiate Recovery Residency Program** – Collegiate recovery programs that offer recovery housing options for students in recovery enrolled at an institution of higher education.
4. **Young Adult Intensive Outpatient Program (IOP)** – Outpatient treatment services for students enrolled at an institution of higher education. An IOP for young adults typically offers flexible day and evening programs so that students can manage treatment services with class schedules. The primary components of IOPs are:
  - Individual and group therapy sessions;
  - Life and study skills development and workshops;
  - Relapse prevention, health, and wellness classes;
  - Case management and peer mentoring; and,
  - Drug testing.
5. **Treatment and Education Program** – Residential or day-treatment program in which individuals are admitted for 10 days or more and can enroll and attend classes through a participating college or university (online, at the treatment center, or on-campus). Medication management and medical monitoring is generally available on-site. Facilities address serious psychological and behavior issues and most are Joint Commission, CARF, and/or NAATP accredited.



## 2017 Census and Definitions for Recovery Support in Higher Education

6. **Transitional Living/Recovery Housing and Education Program** – Substance-free living facilities for individuals recovering from substance misuse or dependency that often serve as a transitional living environment between detoxification or residential treatment and mainstream society or educational settings. Students at these living facilities enroll and take classes through a participating college or university, either online or on-campus.
7. **Recovery Support Referral** – Colleges and universities that offer some level of substance misuse prevention services and referral-based recovery support resources for enrolled students. These services and resources may include:
  - Alcohol & Other Drug Prevention (AOD) Programs, which offer screening and interventions for substance misuse;
  - Counseling and Psychological Services (CAPS), which offer clinical services for behavioral and mental health;
  - Student Health and Wellness Centers, which provide referral services for mutual aid support groups and general wellness classes; and,
  - Resource sites, which provide listings of recovery support group meetings and services near campus.

Following analysis of responses and feedback provided by respondents, researchers recommend the following as the definitional framework to be used when describing recovery support in higher education:

1. Collegiate Recovery (CR) services and resources are to be accompanied by one of three descriptors available for self-selection by institutions of higher education based on the nature and characteristic of the services and resources supporting students in recovery. These include Collegiate Recovery Community (CRC) which are reflective of efforts by students who share a common goal of lifelong sobriety and offer peer recovery support; Collegiate Recovery Program (CRP) which have stated institutional acceptance and authority for the services and resources offered to enrolled students; and, Collegiate Recovery Program Residence (CRPR) which has institutional housing authority and is specific to students in recovery from a substance use disorder.
2. The Transitional/Recovery Residence and Education Program definition should clarify authority distinct from the university and promote the idea that living settings are student-oriented. The classifying term should be Transitional/Recovery Residence and Education Program.
3. A number of comments were submitted suggesting that Recovery Support Referral services on-campus includes helping students with substance-free housing placements (not recovery-specific). This has been included in the final definitional framework.
4. Classifying terms for emerging treatment and therapy programs that provide services specifically to students in recovery should be labeled for clarity as Outpatient Care and Education Program and Treatment and Education Program. This will allow for encompassing the broadest categories of distinct types of care that also maintain a focus on educational advancement.
5. Researchers will extend the existing definitional framework for school-based recovery support in secondary education to include definitions for services and resources in higher education. In doing so, researchers hope to provide the first look at continuing educational support for students in recovery in the U.S.





## 2017 Census and Definitions for Recovery Support in Higher Education

Finally, this research provides updated census data on collegiate recovery services and resources currently organized in the U.S. In total, 184 institutions (2-year and 4-year) were verified as offering some type of recovery service or resource as a part of this research. Verification methods included: (1) Completion of the 2017 Collegiate Recovery Census, (2) Completion of TYR's NASPA (National Association of Student Personnel Administrators) survey, (3) Follow-ups with individual TYR grantees, (4) Awareness of services or resources by TYR's technical assistance coordinator. An additional 55 schools are listed in TYR's database as offering some type of recovery support service or resource but did not provide a complete response to the census or did not provide any response to TYR during the research period. As a result of this effort, when reporting a total number of institutions offering recovery support services and resources researchers recommend using a range of 184-239 versus a finite number.

Additional highlights from the 2017 Collegiate Recovery Census include the following:

### **Stage of development**

52 (40.94%) respondents indicated they are in the early stage of development, 41 (32.28%) respondents indicated they are in the mid stage of development, and 19 (14.96%) respondents indicated they are in the late stage of development.

### **Department or group responsible**

42 (33.07%) respondents indicated the department or group responsible as Health & Wellness Services, 22 (17.32%) respondents indicated the department or group responsible as Counseling and Psychological Services, 21 (16.54%) respondents indicated the department or group responsible as Student Affairs, and 10 (7.87%) respondents indicated the department or group responsible as Alcohol and Other Drug Program/Services.

### **Endorsement**

91 (71.65%) respondents indicated their institution endorsed them where endorsed means that the school recognizes the program on marketing materials, on the website, and leaders are aware of and supportive of the program.

### **Institutionalization**

50 (39.37%) respondents indicated they are institutionalized where institutionalized means that the university or college includes the program in their strategic planning and funding efforts.

### **Scholarships**

18.11% of respondents offer scholarships to participating students while 70.08% do not; however, among early stage programs 92.31% of respondents do not offer scholarships.

### **Student involvement**

31.5% of respondents indicated they have 0-5 undergraduate students involved, 19.96% of respondents indicated they have 6-10 students involved, 14.17% of respondents indicated they have 11-15 students involved, and an additional 20.48% of respondents indicated they have 16 or greater undergraduate students involved. Only 7.09% of respondents indicated they had more than 50 students involved.

### **Regular attendance**

34.65% of respondents indicated they have 0-5 students regularly participating their services and 27.56% indicated they have 6-10 students regularly participating their services. Therefore, over 60% of programs have 10 or fewer students regularly attending.

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### **Application for participation**

17.32% of respondents require an application for participation while 70.08% do not; however, among late stage institutions, 47.37% require an application for participating.

### **Minimum abstinence requirements**

11.81% of respondents indicated they have minimum abstinence requirements while 76.38% of respondents do not.

### **Program space**

52 (40.94%) respondents indicated they have dedicated space only available to participating students while 36 respondents (28.35%) have space that is shared with other groups but consistently available.

Additional census data on year started, faculty and staff involvement, how services and resources help students stay alcohol and drug free, additional practices, admissions processes, accommodations, graduate student involvement, student participation requirements, handling relapse, and more are available in the complete report in addition to a complete analysis and interpretation of the data.

As a result of this research, TYR recommends:

1. The field adopt an expanded definitional framework to better describe the recovery services and resources being offered at institutions of higher education.
2. Researchers and practitioners use the census data to more accurately describe the field, garner additional funding and support, and conduct additional research.
3. The field continue to conduct regular censuses to ensure accurate representations are made of services and resources offered by institutions of higher education expand and endure.

# INTRODUCTION

Transforming Youth Recovery (TYR) is committed to the advancement of asset-based research activities that aim to identify services and resources available at institutions of higher education that can directly support students in recovery from substance use disorders. As a component of pioneering research activities in 2012, TYR conducted a national study to try and identify the collegiate recovery programs organized at colleges and universities in the U.S. At the time, collegiate recovery programs were primarily described as emotional, instrumental, informational, and affiliate supports that foster a community where students are able to flourish in their recovery (Buchanan 2013). The study resulted in the identification of 42 known collegiate recovery programs and early stage efforts.

The research undertaken for the *2017 Census and Definitions for Recovery Support in Higher Education* includes activities intended to update definitions and descriptions for the services and resources that directly support students in recovery at institutions of higher education. A census was undertaken to ascertain the number of institutions offering services and resources in the U.S. along with detailed information on recovery support services available to students on college campuses.

The specific research objectives were defined as:

## RESEARCH OBJECTIVES

1. **Substantiate the assumption that institutions of higher education are offering diverse types of recovery support services and resources for students in recovery from substance use disorders.**

As a component of its Recovery in Higher Education initiative, TYR has offered technical assistance to a network of over 160 colleges and universities that have received grants for the initiation of collegiate recovery services and resources. Over the years, it has been made apparent that the collection of services and resources (“assets”) that institutions use to support and serve students in recovery varies significantly from campus to campus. To date, this observation has been purely anecdotal. The deployment of the collegiate recovery census and analysis of the data specific to definitions, area of focus, and additional practices is intended to substantiate the assumption that diverse types of recovery support services and resources do indeed exist.

2. **Offer a definitional framework for the diverse types of recovery support services and resources in order to strengthen resource classification within the field and enhance accessibility to students and families in need.**

In 2013, TYR researchers collaborated with the Association of Recovery Schools to develop a definitional framework to describe school-based recovery support in secondary education and, specifically, define operating characteristics for recovery high schools. The resulting definitional framework served as a prerequisite for the adoption of an accreditation process for recovery high schools. The effort made here, to offer a definitional framework for recovery support in higher education, is an extension of this work and aims to provide the field with a more detailed view of school-based recovery support services available in the U.S.

Historically, the most common terminology used to describe recovery support services and resources at institutions of higher education has been “collegiate recovery programs” or “collegiate recovery communities.” However, there are services and resources available to college students in recovery that would not be categorized as “programs” or “communities” and the evolution of the field in the past



## 2017 Census and Definitions for Recovery Support in Higher Education

five years warrants an expanded vocabulary to describe recovery support in higher education. TYR's effort to further explore the recovery support services and resources available to students and offer a definitional framework is intended to improve systems for resource classification and help those in need to better access the specific types of support they seek. (Note the term "services and resources" is used throughout this document to refer to all types of recovery support programs, communities, services, and resources available at institutions of higher education.)

### 3. **Update census data on collegiate recovery services and resources currently offered in the U.S.**

TYR's 2015 *Collegiate Recovery Asset Survey Report* marked the conclusion of a series of asset-based research activities aimed at making visible the assets, connections, and practices that can help students in recovery experience a healthy and supportive place to learn and grow. This report reflected nationwide data that had been collected since early 2013. In the same year, researchers in the field published *Characteristics of students participating in Collegiate Recovery Programs: A national survey*. Recognizing that recovery support has continued to evolve since 2015, census activities are imperative to ensure that data on collegiate recovery is available to researchers and administrators looking to continue growth and funding efforts. TYR's effort to collect collegiate recovery census data is intended to ensure the field has an accurate, up-to-date picture of the current landscape for institutional and national advocacy, development, and policy objectives.



# METHODOLOGY

To begin, a review of informational and programmatic materials was completed to identify the terminology being used by institutions and researchers to describe recovery support services and resources at institutions of higher education. This review resulted in the drafting of preliminary definitions describing operational characteristics for various types of recovery support services and resources that may be available to students attending colleges and universities in the U.S.

These preliminary definitions included:

1. **Collegiate Recovery Community** – Emergent efforts by students in recovery from substance misuse or dependency to create safe, supportive learning environments at an institution of higher education. The primary components of collegiate recovery communities are:
  - Mutual aid support groups near or on campus for students in recovery and students or other committed individuals who gather together socially, participate in sober activities; and,
  - Peer recovery support in a community setting.
2. **Collegiate Recovery Program** – Programs offered at institutions of higher education that provide safe, supportive learning environments for enrolled students in recovery from substance misuse or dependency. The primary components of collegiate recovery programs are:
  - Mutual aid support groups near or on campus for students in recovery;
  - Physical space for students to gather together socially, participate in sober activities, and experience peer recovery support in a safe environment;
  - Institutional acceptance and support of the collegiate recovery program and the academic goals of students in recovery;
  - Staff, counselors, or student leaders who are dedicated to the collegiate recovery program; and,
  - Peers, recovery coaches, or counselors who are available for recovery support.
3. **Collegiate Recovery Residency Program** – Collegiate recovery programs that offer recovery housing options for students in recovery enrolled at an institution of higher education.
4. **Young Adult Intensive Outpatient Program (IOP)** – Outpatient treatment services for students enrolled at an institution of higher education. An IOP for young adults typically offers flexible day and evening programs so that students can manage treatment services with class schedules. The primary components of IOPs are:
  - Individual and group therapy sessions;
  - Life and study skills development and workshops;
  - Relapse prevention, health, and wellness classes;
  - Case management and peer mentoring; and,
  - Drug testing.



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5. **Treatment and Education Program** – Residential or day-treatment program in which individuals are admitted for 10 days or more and can enroll and attend classes through a participating college or university (online, at the treatment center, or on-campus). Medication management and medical monitoring is generally available on-site. Facilities address serious psychological and behavior issues and most are Joint Commission, CARF, and/or NAATP accredited.
6. **Transitional Living/Recovery Housing and Education Program** – Substance-free living facilities for individuals recovering from substance misuse or dependency that often serve as a transitional living environment between detoxification or residential treatment and mainstream society or educational settings. Students at these living facilities enroll and take classes through a participating college or university, either online or on-campus.
7. **Recovery Support Referral** – Colleges and universities that offer some level of substance misuse prevention services and referral-based recovery support resources for enrolled students. These services and resources may include:
  - Alcohol & Other Drug Prevention (AOD) Programs, which offer screening and interventions for substance misuse;
  - Counseling and Psychological Services (CAPS), which offer clinical services for behavioral and mental health;
  - Student Health and Wellness Centers, which provide referral services for mutual aid support groups and general wellness classes; and,
  - Resource sites, which provide listings of recovery support group meetings and services near campus.

Once these definitions were established, selection and evaluation of the definitions was made possible through the deployment of the collegiate recovery census. This survey was emailed to 249 contacts at 4-year and 2-year colleges and universities and advertised on various social media channels.

The survey was broken into three parts. Part one asked participants to name the recovery support services or resources at their institution and provide contact information. Part two asked participants to select a definition that best described their recovery support services and resources and provide feedback on the definitions offered. Part three asked questions specific to their collegiate recovery services and resources. In total this survey had 183 total respondents; 127 responses from 118 unique institutions were complete enough to include in the analysis.

Research was then conducted at two regional NASPA (Lincoln, NE and Springfield, MA) conferences as well as the NASPA National Strategies (Portland, OR) conference to collect additional information on recovery support services and resources being offered at institutions of higher education for which researchers did not already have an established contact or relationship. Attendees of these conferences were asked to complete part one of the survey which prompted them to name the recovery support services or resources at their institution and select a definition that best described the type of recovery support offered. In total this survey had 79 total respondents from 58 unique institutions.

Finally, collegiate recovery services and resources at institutions of higher education for which TYR had an established relationship that did not complete the census were subsequently contacted to gauge current activity.

Once all data was collected, researchers organized and analyzed the data. The findings and analysis can be found in the sections that follow.

## Response Rate



Number of unique institutions of higher education that provided a thorough enough response for their data to be included in the analysis

## Number of Institutions Offering Services & Resources



184

Verified

55

Unverified

## Areas of Focus



87.4% Peer support

34.7% Counseling or clinical support

74.0% Social activities and sober fun

22.1% Other

## Year Started



8 Began prior to 2009

14 Began in 2010-2012

87 Began between 2013 and 2017

## Endorsement



71.7%

Administration endorses efforts

15.8%

Administration does not endorse efforts

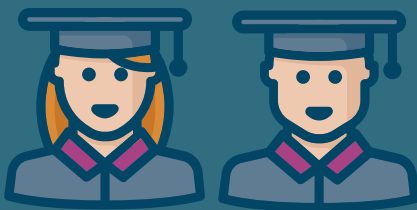
## Institutionalization



39.4% Have institutionalized recovery resources on campus

46.5% Have not institutionalized recovery resources

## Student Involvement



31.5% Have 0-5 students involved

19.7% Have 6-10 students involved

14.2% Have 11-15 students involved

7.1% Have more than 50 students

## Housing



11% offer housing as part of their services

## Program Definitions

38.9%

Identify as a Collegiate Recovery Community

61.0%

Identify as a Collegiate Recovery Program

10.2%

Identify as a Collegiate Recovery Residency Program

28.8%

Identify as offering Recovery Support Referrals

### FINDINGS

The collegiate recovery census was sent to 249 contacts and promoted via TYR's social media channels. Responses were received from 183 individuals for a response rate of 73.49%. 127 responses were complete enough to include in the survey analysis. 118 unique institutions of higher education provided responses.<sup>2</sup> At the time the survey was deployed, TYR was aware of 216 institutions offering recovery support services and resources; this means the data and analysis that follows includes responses from over half (54.63%) of the institutions of higher education believed to be actively involved in the field. Additional follow-up was also completed for the 44 TYR grantees who did not initially complete the collegiate recovery census; for these schools, emails and Facebook messages were sent and phone calls were made to determine if services and resources still existed on the campus. The same effort was made with institutions that the Association for Recovery in Higher Education (ARHE) lists as member organizations, which TYR had not previously identified. As a result, although specific data is not included in our analysis for every institution in the field, researchers believe that the count of institutions is the most accurate the field has as of the date of publication.

In the data that follows, researchers present responses in aggregate, by age of services and resources, and by stage of development depending on the census topic. If others working the field are looking to conduct additional analysis or segment the data in different ways, they should contact TYR for access to raw data.

### Definitional framework

The collegiate recovery census prompted respondents to, "Please review the definitions below and share which one best describes your program or services." Respondents then selected from the following options: (1) Collegiate Recovery Community, (2) Collegiate Recovery Program, (3) Collegiate Recovery Residency Program, (4) Young Adult Intensive Outpatient Program (IOP), (5) Treatment and Education Program, (6) Transitional Living/Recovery Housing and Education Program, and (7) Recovery Support Referral. 127 respondents made 178 definition selections. Among respondents they defined their recovery support services and resources as follows:

#### Recovery support services and resources by definition (N=127)

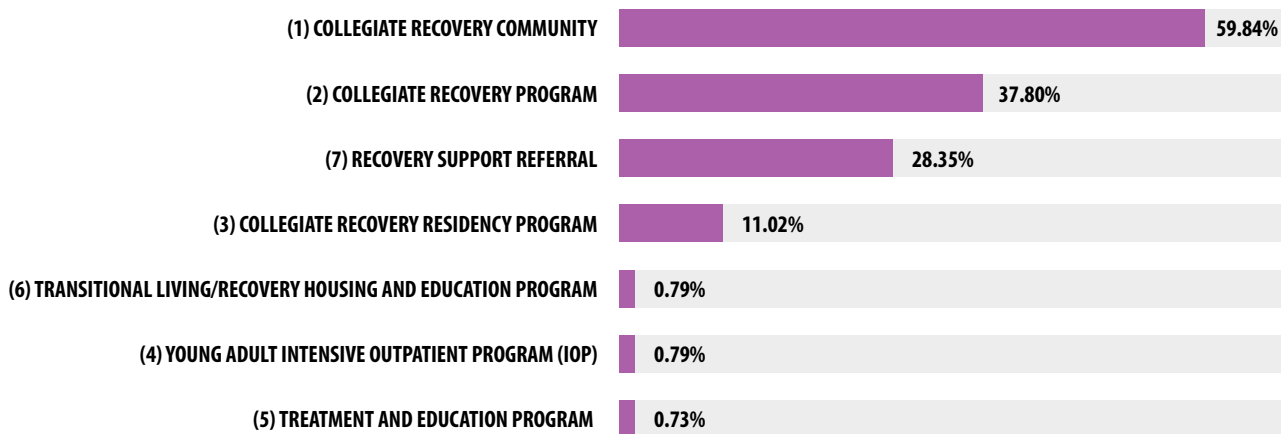


Chart 1. Recovery support services and resources by definition (N=127).

2. Researchers continued to follow-up with colleges and universities even after analysis of survey responses was completed in order to get the most accurate program data and count of institutions offering services and resources possible. At the time of publication 136 unique institutions had responded to the census. Any services and resource data provided will be used to update online resource data sets available at <https://www.transformingyouthrecovery.org/areas-of-focus/recovery-in-higher-education>; however, their response data was not included in the survey analysis.



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Respondents were then asked to provide feedback on the definitions provided. 22 respondents provided feedback on the definitions that were offered. Researchers analyzed the feedback and updated the set of preliminary definitions that were provided in the analysis section of this report. The complete definitional framework for school-based recovery support can be found in Appendix IV.

### Start year

The collegiate recovery census prompted respondents to answer, “What year did you start serving/supporting students in recovery?” 111 of 127 respondents answered the question. Among respondents they indicated their programs started in the following years:

### Number of programs started each year

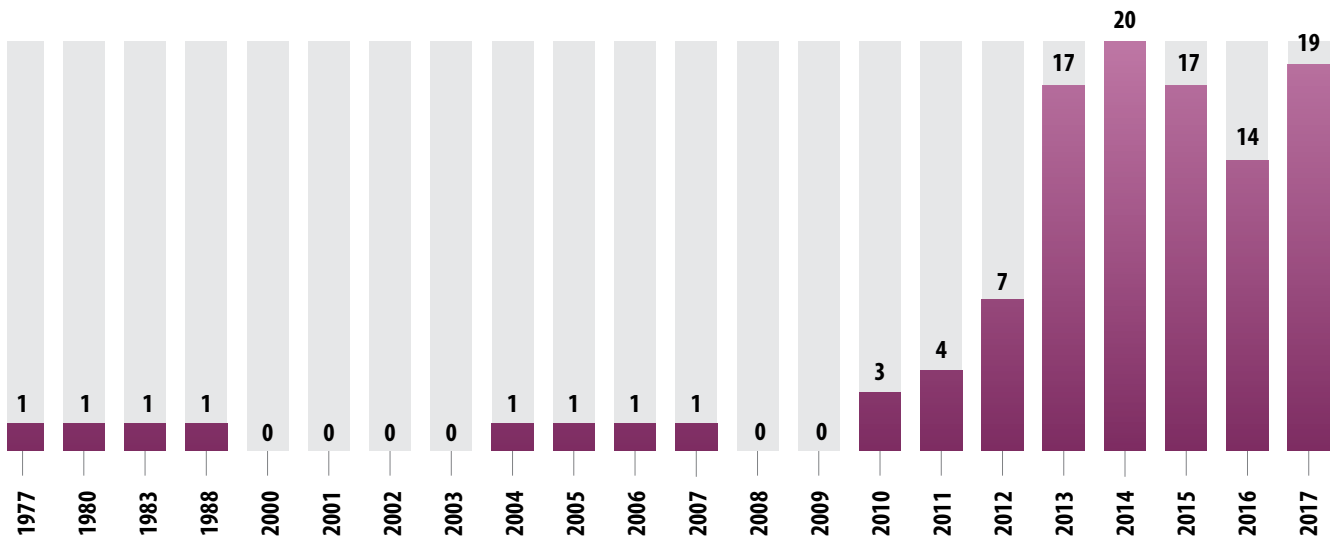


Chart 2. Number of programs started each year.

### Stage of development

The collegiate recovery census prompted respondents to, “Describe your program’s stage of development.” Respondents then selected from the following options: (1) Early Stage: This is a new effort; focus on recruiting students and educating/mobilizing campus and local community, (2) Mid Stage: Growing a community of students and supporters; moderate amount of institutional support (e.g. allocated funds), and (3) Late Stage: Have a thriving community of students and supporters; significant amount of institutional support. 112 of 127 respondents answered the question. Among respondents they identified their stage of development as follows:

Stage of development	#	%	Median year since started serving students	Min year	Max year
Early stage	52	40.94%	2015	1980	2017
Mid stage	41	32.28%	2014	1977	2017
Late stage	19	14.96%	2013	1983	2017
No response	15	11.81%			

Table 2. Stage of development.

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### Department or group responsible for services and resources

The collegiate recovery census prompted respondents to answer, “Which department or group is responsible for your program?” 111 of 127 respondents answered the question. College and universities call their campus departments by unique names, often referring to similar functions. As a result, researchers needed to create a taxonomy to codify the responses. Researchers created nine categories to use when coding the data. They included: (1) Alcohol and Other Drug Programs/Services, (2) Campus Recreation, (3) Counseling and Psychological Services, (4) Dean’s Office, (5) Department of Social Work/Human Services, (6) Enrollment Services, (7) Health & Wellness Services, (8) Student Affairs, and (9) Student Organization. Additionally, included below is the department or group responsible based on the year the services and resources were started. This view of the data is offered to help assess whether time-based trends exist in where institutions are housed within institutions. Among respondents they identified the department or group responsible for their services and resources as follows:

Department or group responsible	All (Count)	All (%)	Less than one year # (Started in 2017)	Less than one year % (Started in 2017)	1-3 years # (Started in 2016, 2015, 2014)	1-3 years % (Started in 2016, 2015, 2014)	4-6 years # (Started in 2013, 2012, 2011)	4-6 years % (Started in 2013, 2012, 2011)	More than 6 years # (Started in 2010 or prior)	More than 6 years % (Started in 2010 or prior)
Alcohol and Other Drug Program/ Services	10	7.87%	1	5.26%	4	7.84%	4	14.29%	0	0.00%
Campus Recreation	1	0.79%	0	0.00%	1	1.96%	0	0.00%	0	0.00%
Counseling and Psychological Services	22	17.32%	4	21.05%	12	23.53%	4	14.29%	1	9.09%
Dean’s Office	5	3.94%	2	10.53%	1	1.96%	0	0.00%	2	18.18%
Department of Social Work/ Human Services	5	3.94%	2	10.53%	3	5.88%	0	0.00%	0	0.00%
Enrollment Services	2	1.57%	2	10.53%	0	0.00%	0	0.00%	0	0.00%
Health & Wellness Services	42	33.07%	6	31.58%	18	35.29%	14	50.00%	2	18.18%
Student Affairs	21	16.54%	1	5.26%	9	17.65%	5	17.86%	6	54.55%
Student Organization	3	2.36%	1	5.26%	1	1.96%	1	3.57%	0	0.00%
No Response	16		0		2		0		0	

Table 3. Department or group responsible for services and resources and department or group responsible for services and resources by years since program started.<sup>3</sup>

To see all 111 unique responses reference Appendix I.

3. Throughout the report “All” is used to label data in tables. “All” includes responses from all survey respondents providing a response to a particular question. Stage and age are also included in many tables. The total number of responses included in stage and age may not add up to the number of responses in All as to be included in age or stage a survey respondent would have needed to provide responses to two questions (in the case of above, department or group responsible and age) whereas to be included in All the survey respondent need only reply to one question (department or group responsible).

### Faculty and staff involvement

The collegiate recovery census prompted respondents to, “Describe your program’s faculty/staff involvement.” Respondents then selected from the following options: (1) The program is student-led and there are no responsible faculty/staff, (2) The faculty/staff responsible for the program volunteer their time, (3) The faculty/staff responsible for the program have this as 25% or less of their assigned job duties, (4) The faculty/staff responsible for the program have this as 26-50% of their assigned job duties, (5) The faculty/staff responsible for the program have this as 51-99% of their assigned job duties, (6) There are multiple faculty/staff members responsible for services, but none of them are dedicated entirely to the program, (7) There is one dedicated faculty/staff person whose entire job responsibility is the program, (8) There are multiple faculty/staff members responsible for services, and one of them is dedicated entirely to the program, and (9) There is more than one dedicated faculty/staff person whose entire job responsibility is the program. 109 of 127 respondents answered the question. Additionally, included below is faculty/staff involvement by stage. This view of the data is offered to help assess whether stage-based trends exist in faculty/staff involvement. Among respondents they identified faculty and staff involvement as follows:

### Faculty and staff involvement

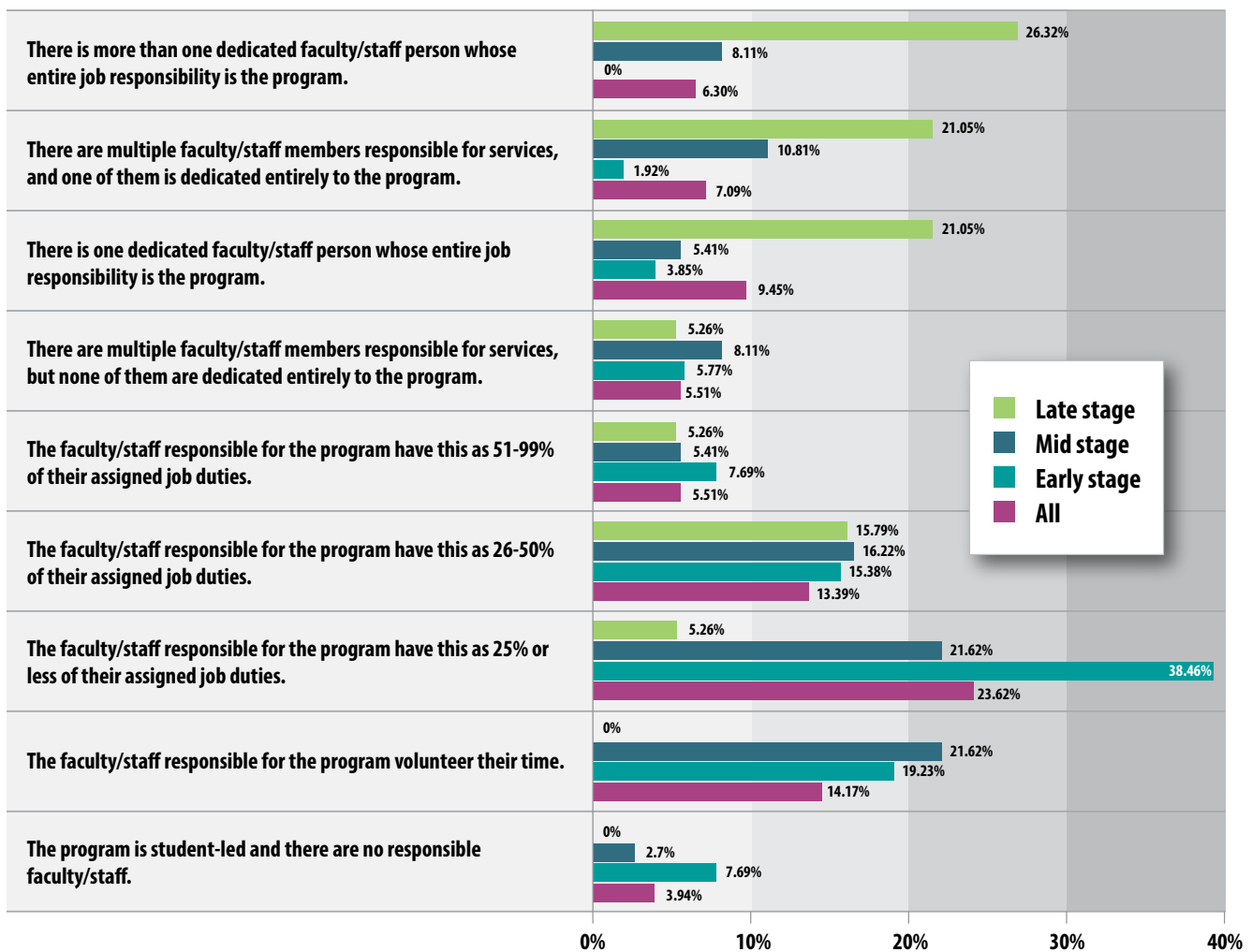


Chart 3. Faculty/staff involvement by stage.

## 2017 Census and Definitions for Recovery Support in Higher Education

### Endorsement by institution

The collegiate recovery census prompted respondents to answer, “Is your program officially endorsed by the college or university? Endorsed means that the school recognizes the program on marketing materials, on the website, and leaders are aware of and supportive of the program.” Respondents then selected from the following options: (1) Yes or (2) No. 111 of 127 respondents answered the question. Additionally, included below is endorsement by the year the services and resources started. This view of the data is offered to help assess whether time-based trends exist in endorsement. Among respondents they identified endorsement as follows:

Endorsement	All (Count)	All (%)	Less than one year # (Started in 2017)	Less than one year % (Started in 2017)	1-3 years # (Started in 2016, 2015, 2014)	1-3 years % (Started in 2016, 2015, 2014)	4-6 years # (Started in 2013, 2012, 2011)	4-6 years % (Started in 2013, 2012, 2011)	More than 6 years # (Started in 2010 or prior)	More than 6 years % (Started in 2010 or prior)
Yes	91	71.65%	18	100.00%	39	78.00%	23	82.14%	8	72.73%
No	20	15.75%	0	0.00%	11	22.00%	5	17.86%	3	27.27%
No Response (18)										

Table 4. Endorsement and endorsement by years since services and resources started.

### Institutionalization by institution

The collegiate recovery census prompted respondents to answer, “Has your program been institutionalized? Institutionalized means that the university or college includes the program in their strategic planning and funding efforts.” Respondents then selected from the following options: (1) Yes or (2) No. 109 of 127 respondents answered the question. Additionally, included below is institutionalization by the year the services and resources were started. This view of the data is offered to help assess whether time-based trends exist in institutionalization. Among respondents they identified institutionalization as follows:

Institutionalization	All (Count)	All (%)	Less than one year # (Started in 2017)	Less than one year % (Started in 2017)	1-3 years # (Started in 2016, 2015, 2014)	1-3 years % (Started in 2016, 2015, 2014)	4-6 years # (Started in 2013, 2012, 2011)	4-6 years % (Started in 2013, 2012, 2011)	More than 6 years # (Started in 2010 or prior)	More than 6 years % (Started in 2010 or prior)
Yes	50	39.37%	6	35.29%	17	34.69%	15	53.57%	10	90.91%
No	59	46.46%	11	64.71%	32	65.31%	13	46.43%	1	9.09%
No Response (18)										

Table 5. Institutionalization and institutionalization by years since services and resources started.

### How services and resources help students stay alcohol and drug free

The collegiate recovery census prompted respondents to, “Please describe how the program helps students stay alcohol and drug free.” 98 respondents provided 276 unique responses. Researchers created a taxonomy to codify responses. If multiple codes were addressed in a single response, the response was counted under multiple codes. Responses were placed into 14 categories including an “Other” category. Additionally, each of the 38 assets that are correlated with the code is recorded below to demonstrate that the 38 assets identified in TYR’s inaugural research remain as relevant as ever. A complete listing of responses can be found in Appendix V.

## 2017 Census and Definitions for Recovery Support in Higher Education

TYR taxonomy for helping students stay alcohol & drug free	#	Correlating assets
Academic Support	5	Individuals who can provide students in recovery with academic guidance (i.e. tutoring, counseling, etc.).
Awareness Building/Stigma Reduction/Advocacy	12	Individuals who are influential within the University and/or in the broader community and are interested in advocating for students in recovery. Organizations, departments, and services that can provide the general population (students, faculty, and staff ) with education and training to increase understanding of substance use disorders and recovery (presentations, newsletters, events, orientations, new hire training, etc.).
Community Service	6	Organizations, groups, and clubs that facilitate involvement in community service, philanthropy, and civic engagement (speaking at high schools, service projects, etc.).
Counseling & Behavioral Health Support	23	Individuals licensed or trained to support both mental health (ADHD, anxiety, depression, etc.) and substance use disorders (alcohol and other drugs). Individuals trained as drug and alcohol counselors in the areas of addiction and recovery.
Housing	8	Appropriate and protective housing options for students in recovery (sober roommates, floors, buildings, etc.).
Life Skills Training	3	Individuals who can help students in recovery build self-efficacy (confidence, social skills, budgeting, general life-skills, etc.). Organizations, groups, and clubs that help students enhance their physical health and wellness (nutrition information, fitness programs, health screenings, stress and anxiety, meditation, etc.). Organizations, groups and clubs that enable students to gain and practice leadership skills (through internships, community service, mentoring, through participation student-led organizations, etc.).
Peer Support	58	Students in recovery who are interested in growing the recovery community on campus. Students in recovery who are interested in mentoring other students in recovery (vocational, recovery, or as a general role model).
Recovery/Relapse Prevention Programming	55	Individuals available for 1:1 recovery support (coaching, guiding, supporting, mentoring) Mutual aid support groups near or on campus for students in recovery (i.e. AA, NA, GA, and other 12-Step meetings in addition to groups such as Celebrate Recovery, SMART Recovery, eating disorder recovery, Teen Challenge, etc.). Individuals who can serve as positive mentors (professional, recovery, or as a general role model) for students in recovery. Students in recovery who are trained to lead and facilitate groups.
Referral to Services	14	Organizations, departments, and services that a collegiate recovery program can refer students to if they need outside services (treatment centers, mental health professionals, counselors, psychologists, etc.). Organizations, departments, and services that can help students meet basic needs (food, safe shelter, etc.). Organizations, groups, and clubs that can provide students in recovery access to recovery resources in the broader community (support programs, counseling, housing, etc.).
Safe Space/Environment	25	Physical space for students to get together socially, soberly, and safely (organized meals, dances, bowling, or other age-appropriate activities). Physical space that is dedicated for students in recovery to gather and meet.
Social Events/Activities	36	Individuals who are dedicated staff for a collegiate recovery program (faculty, staff, students; full or part-time).
Staff Led Check-Ins	15	
Technological Support (app, texts, etc)	2	
Other	14	

Table 6. How services and resources help students stay alcohol and drug free.

## 2017 Census and Definitions for Recovery Support in Higher Education

### Area of focus

The collegiate recovery census prompted respondents to answer, “What is your program’s areas of focus? Select all that apply.” Respondents then selected from the following options: (1) Peer support, (2) Counseling or clinical support, (3) Social activities and sober fun, or (4) Other. 113 of 127 respondents answered the question. Additionally, included below is area of focus by stage. This view of the data is offered to help assess whether stage-based trends exist in area of focus. Among respondents they identified area of focus as follows:

#### Area of focus

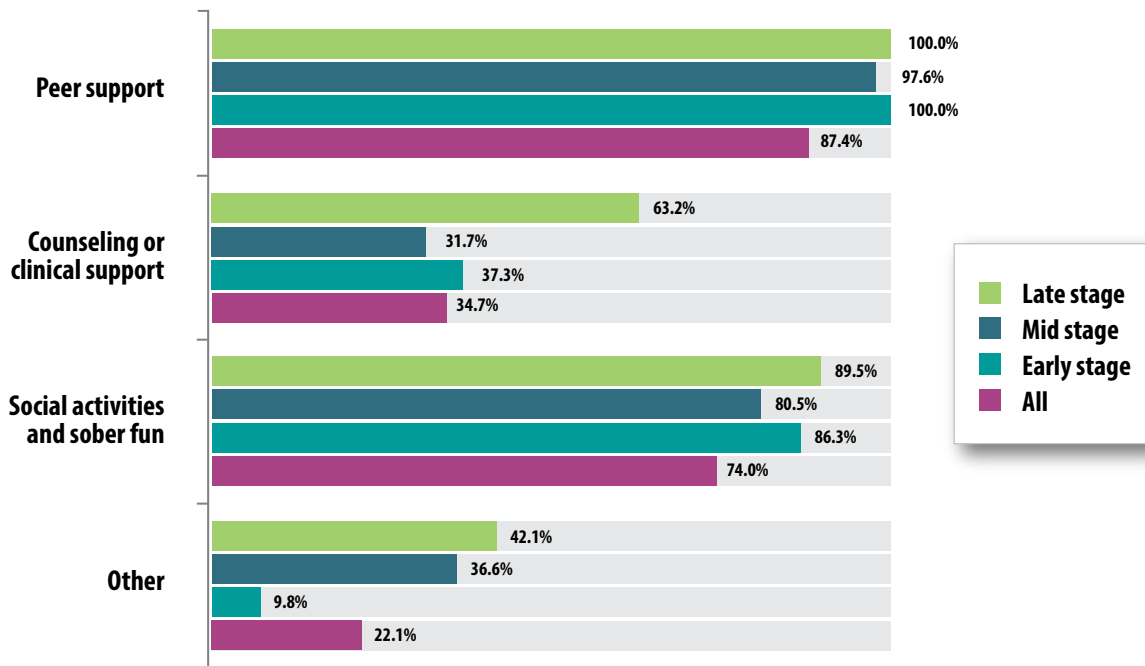


Chart 4. Area of focus by stage.

In total, 28 respondents indicated “Other” as an area of focus. The table below outlines what those write in responses included.

Other areas of focus identified *	#
Academic advising	1
Advocacy, outreach, & education	10
Community service	5
Fundraising	1
Mentoring	1
Parent & family services	1
Recovery housing	2
Recovery support & resources	4
Safe space	3
Student development (leadership and life skills)	4
Student organization	1
* Respondents listed in more than one other area of focus.	

Table 7. Other areas of focus.

## 2017 Census and Definitions for Recovery Support in Higher Education

### Additional practices

The collegiate recovery census prompted respondents to answer, “What are your program’s practices? Select all that apply.” Respondents then selected from the following options: (1) Advocacy efforts undertaken for student needs, (2) Arrange for access to gyms, sports facilities, or intramural activities, (3) Arrange for seminars, classes, or academic advising for students, (4) Connect to job-placement, internship, and career-day programs, (5) Coordinate events to raise awareness on campus, (6) Facilitate life skills workshops, (7) Give presentations on recovery resources in the community, (8) Have a registered student organization or club, (9) Have advocacy, advisory board, and/or coalition meetings, (10) Host on-campus 12-step or other mutual aid support groups, (11) Keep consistent drop-in hours, (12) Mentor high school students in recovery, (13) Offer relapse training to staff and students, (14) Offer peer mentoring support, (15) Organize sober social events for the recovery community and beyond, (16) Plan activities with students’ families (e.g. parents’ weekend), (17) Promote community service and other volunteer opportunities, (18) Provide professional counseling, (19) Provide recovery workshops (e.g. spirituality, meditation, 12 steps for self-compassion), (20) Schedule group meetings other than formal/clinical support group meetings, (21) Set recurring recovery group events (e.g. sober birthday celebrations, weekly dinners, etc.), (22) Staff and students attend conferences, (23) Staff-led outings off-campus, (24) Student-led outings off-campus, and (25) Other.<sup>4</sup> 112 of 127 respondents answered the question. Additionally, included below are additional program practices by program stage. This view of the data is offered to help assess whether stage-based trends exist in practices. Among respondents they identified additional practices as follows:

Additional practices	# (All)	% (All)	# (Early stage)	% (Early stage)	# (Mid stage)	% (Mid stage)	# (Late stage)	% (Late stage)
Advocacy efforts undertaken for student needs	90	70.87%	33	63.46%	38	92.68%	19	100.00%
Arrange for access to gyms, sports facilities, or intramural activities	18	14.17%	5	9.62%	8	19.51%	5	26.32%
Arrange for seminars, classes, or academic advising for students	39	30.71%	6	11.54%	21	51.22%	12	63.16%
Connect to job-placement, internship, and career-day programs	18	14.17%	2	3.85%	8	19.51%	8	42.11%
Coordinate events to raise awareness on campus	94	74.02%	40	76.92%	37	90.24%	17	89.47%
Facilitate life skills workshops	42	33.07%	13	25.00%	16	39.02%	13	68.42%
Give presentations on recovery resources in the community	55	43.31%	18	34.62%	25	60.98%	12	63.16%
Have a registered student organization or club	64	50.39%	28	53.85%	25	60.98%	11	57.89%
Have advocacy, advisory board, and/or coalition meetings	38	29.92%	14	26.92%	15	36.59%	9	47.37%
Host on-campus 12-step or other mutual aid support groups	84	66.14%	34	65.38%	33	80.49%	17	89.47%
Keep consistent drop-in hours	49	38.58%	14	26.92%	22	53.66%	13	68.42%
Mentor high school students in recovery	9	7.09%	1	1.92%	4	9.76%	4	21.05%
Offer relapse training to staff and students	16	12.60%	5	9.62%	7	17.07%	4	21.05%

4. The list of practices offered was developed based on TYR’s previous research and grantee technical assistance efforts.

## 2017 Census and Definitions for Recovery Support in Higher Education

Table continued from previous page

Additional practices	# (All)	% (All)	# (Early stage)	% (Early stage)	# (Mid stage)	% (Mid stage)	# (Late stage)	% (Late stage)
Offer peer mentoring support	64	50.39%	21	40.38%	27	65.85%	15	78.95%
Organize sober social events for the recovery community and beyond	92	72.44%	38	73.08%	35	85.37%	19	100.00%
Plan activities with students' families (e.g. parents' weekend)	22	17.32%	4	7.69%	7	17.07%	11	57.89%
Promote community service and other volunteer opportunities	57	44.88%	17	32.69%	23	56.10%	17	89.47%
Provide professional counseling	42	33.07%	18	34.62%	13	31.71%	11	57.89%
Provide recovery workshops (e.g. spirituality, meditation, 12 steps for self-compassion)	46	36.22%	14	26.92%	18	43.90%	14	73.68%
Schedule group meetings other than formal/clinical support group meetings	54	42.52%	17	32.69%	21	51.22%	16	84.21%
Set recurring recovery group events (e.g. sober birthday celebrations, weekly dinners, etc.)	51	40.16%	17	32.69%	19	46.34%	15	78.95%
Staff and students attend conferences	69	54.33%	26	50.00%	26	63.41%	17	89.47%
Staff-led outings off-campus	44	34.65%	13	25.00%	17	41.46%	14	73.68%
Student-led outings off-campus	52	40.94%	14	26.92%	23	56.10%	15	78.95%
Other	8	6.30%	3	5.77%	3	7.32%	2	10.53%

Table 8. Additional practices and additional practices by stage of development.

In total, eight respondents indicated “Other” as a practice. The table below outlines what those write in responses included.

Other practices
Staff support students in their own efforts to advocate for other students in recovery with campus officials and legislators
We are in the planning stages of several events
Starting at zero and rebuilding. Many of these things will be offered.
Education abroad
Participate in campus and community coalitions related to SUD and recovery, and provide opportunities for students to participate in these activities.
Recovery Graduation celebration and Experiential Learning programs—Monthly Social Gathering
Direct Care Services - Sober Coaching/Meeting Escorts & Abstinence Verification Systems (Breathalyzers and Urinalysis)
Provide stress management and active relaxation skills training

Table 9. Other practices.



### Admissions process

The collegiate recovery census prompted respondents to, “Describe the school’s admission process for students in recovery.” Respondents then selected from the following options: (1) The program has no relationship with the admissions office, (2) The admissions office will contact us through a formalized or regular process if they become aware of a student in recovery who is applying, (3) The admissions office has occasionally contacted us if they become aware of a student in recovery, but this is not a formalized or regular process, (4) Students in recovery typically come to us prior to applying, and we guide them through the admissions process, or (5) Other. 108 of 127 respondents answered the question. Additionally, included below is admissions process by program stage. This view of the data is offered to help assess whether stage-based trends exist in admissions processes. Among respondents they identified admissions process as follows:

### Admission process

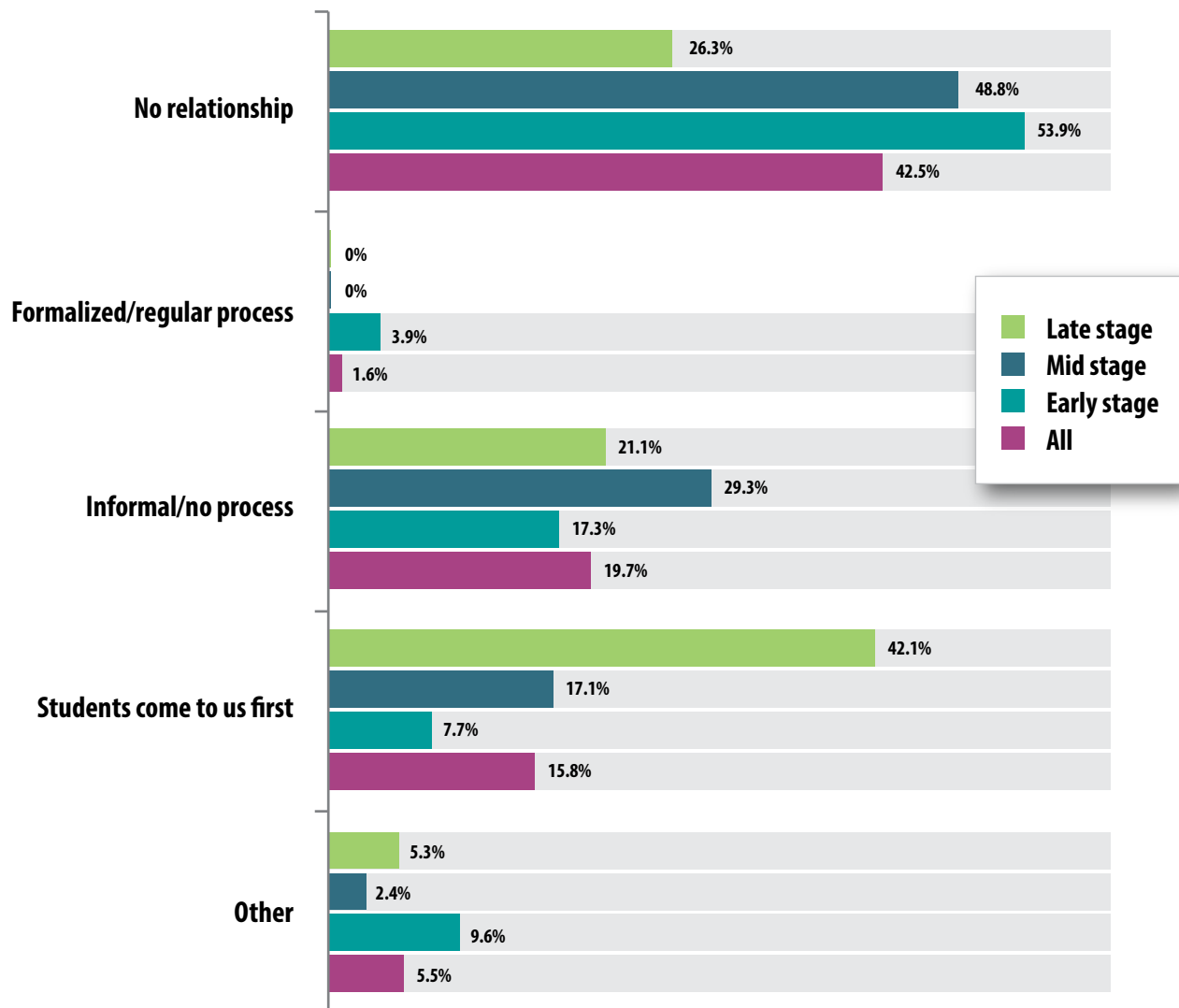


Chart 5. Admissions process by stage.

2017 Census and Definitions for Recovery Support in Higher Education

In total, seven respondents indicated “Other.” The table below outlines what those write in responses included.

Other admission processes
The program is fairly new and we are in the process of working with admissions to put this in their recruiting materials.
The admissions office will contact director/dean and they will reach out to the student upon admission. The director/dean, will then forward us names of students interested in either the recovery group or also the sister substance-free programming student group.
Numbers one and two both apply.
Policy being developed, this is our 1st semester of operations.
We are new to this - so in the process of educating the admissions office.
Students come to us in various ways. Such as, referrals from therapists, psychiatrists, sober living communities, treatment centers, and members of the recovery community. Also, students are referred to us by the Dean of Students Office, Housing Department, and the Counseling center on campus.
We are working with the admissions office to support incoming students in recovery.

Table 10. Other admission processes.

Scholarships

The collegiate recovery census prompted respondents to answer, “Are there scholarships offered to students?” If a respondent answered yes, they were then prompted to answer, “What scholarships are offered?” 112 of 127 respondents answered the question. Additionally, included below is scholarships by stage. This view of the data is offered to help assess whether stage-based trends exist in scholarships. Among respondents they identified availability of scholarships as follows:

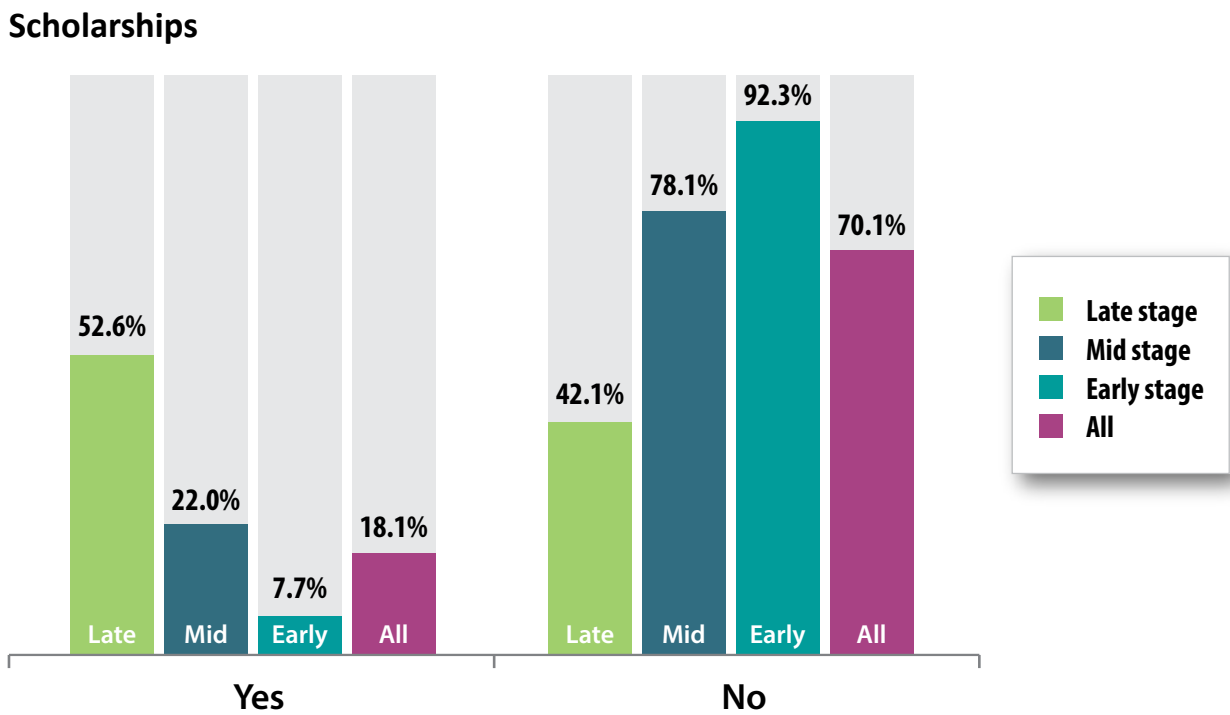


Chart 6. Scholarships by stage.

## 2017 Census and Definitions for Recovery Support in Higher Education

In total, 22 respondents named the scholarship offered. The table below outlines what those responses included.

Name/types of scholarships offered
Governor's Institute Scholarship for those seeking Substance Use Counseling licensure
1, \$500 for books
Acts of Kindness
\$500 scholarship awarded to exceptional student(s) who contribute a ton to CRP
A scholarship for students in recovery
Merit based and need based
\$500-\$2000 per semester
FAFSA student aid can go towards housing because its connected with the school
Recovery House Scholarship and a separate scholarship to pay for textbooks
Small amounts to students who request
Scholarships ranging from \$100 to \$2000+, dependent on funds available, number of applicants, and points earned. Points are based on demonstrated dedication to recovery, service, and academic growth; however, they are not based on GPA, only on growth. Scholarships only available to students, but for non-college participants other scholarship opportunities are regularly promoted in the community. Scholarship minimum requirements include 6 months of recovery time, regular participation in activities, and at least 30 hours of service work per semester. Scholarship applications and awards are distributed near the end of each long semester (fall and spring).
To attend collegiate recovery conferences and retreats. No current academic scholarships, but it is in our long-term goals and vision.
Academic scholarships that are awarded based on community participation and an earned 3.0 GPA for the fall and spring semester.
We just did a regional event - golf outing - which had a scholarship for one student in recovery and we narrowed it down to the top 3. 1st place got \$1000 and 2nd and 3rd got \$500. This was a one time event though and not a standard yearly scholarship. We do hope it turns into that.
We have limited scholarship availability. Our scholarships have been provided through private donations. Currently we offer 3 scholarships per semester in the amount of \$3,300 each.
CRC Housing scholarships
Wellness Activity in support of recovery scholarships.
2, \$500 scholarships a year, plus living stipends for house managers
One \$2500 per semester to one student One \$1,000 annually to one student (we have another \$2500 per semester to one student in process)
For students in early recovery who complete college success course designed for people in recovery
Mary Beth Wedum Recovery Community Scholarship
\$1,000 each semester, must have 6 months sobriety, 3 letters of reference and a 3.0 semester GPA.

Table 11. Name/types of scholarships offered.



### Accommodations

The collegiate recovery census prompted respondents to answer, “What accommodations does your program offer to students in recovery? Select all that apply.” Respondents then selected from the following options: (1) Early class registration, (2) Priority housing sign-ups, single rooms, or room changes, (3) Extra time on tests, (4) Medical withdrawals for students to attend treatment, (5) Access to lecture notes, and (6) Other. 43 of 127 respondents answered the question. Additionally, included below is accommodations by stage. This view of the data is offered to help assess whether stage-based trends exist in accommodations. Among respondents they identified the following accommodations:

Accommodations	# (All)	% (All)	# (Early stage)	% (Early stage)	# (Mid stage)	% (Mid stage)	# (Late stage)	% (Late stage)
Early class registration	8	6.30%	0	0.00%	4	9.76%	4	21.05%
Priority housing sign-ups, single rooms, or room changes	14	11.02%	1	1.92%	7	17.07%	6	31.58%
Extra time on tests	9	7.09%	2	3.85%	4	9.76%	3	15.79%
Medical withdrawals for students to attend treatment	27	21.26%	13	25.00%	10	24.39%	4	21.05%
Access to lecture notes	3	2.36%	0	0.00%	2	4.88%	1	5.26%
Other	15	11.81%	1	1.92%	6	14.63%	5	26.32%

Table 12. Accommodations and accommodations by stage.

In total, 15 respondents indicated “Other” as an accommodation type. The table below outlines what those write in responses included.

Other accommodations
None of these are standard, but requests for accommodations can be handled for all of the above with our counseling, mental health services, and substance use intervention and treatment staff.
We are a student-run group, instead of a part of a university office.
Depending on if they are registered with our Center for Access & Success and have a need, students can get accommodations in housing and academics.
All of these services are available through the Disabled Students Program if students in recovery wish to utilize them, but we do not provide them directly through our program. We encourage our students to take advantage of the service if it is needed because of impairments related to addiction/recovery, but they don't automatically qualify just by being in recovery.
We connect students with OALA, who provides all of the above.
Referral to SDS department for accommodations.
While not offered through our office, coordinate with the offices that do offer these services.
Medical withdrawals and access to lecture notes are done in conjunction with the Center for Students with Disabilities.
These are offered through our ACCESS office, not through CRP.

# 2017 Census and Definitions for Recovery Support in Higher Education

Table continued from previous page

Other accommodations
Case management and family supports.
For the unmarked areas, students go through accessibility services to obtain them.
Varies for every student - determined by the Resource Center for Persons with Disabilities
Financial help
Depends on students needs and working with the appropriate resources on campus.
Arranged through Disability Services, not the CRC

Table 13. Other accommodations.

## Student involvement

The collegiate recovery census prompted respondents to answer the following three questions regarding student involvement: (1) “How many undergraduate students are involved?”, (2) “How many graduate students are involved?”, and (3) “How many students regularly attend activities, events, or support services?” Respondents then selected from the following options: (1) 0-5, (2) 6-10, (3) 11-15, (4) 16-20, (5) 21-30, (6) 31-40, (7) 41-50, (8) 50+. 113 of 127 respondents answered the question about undergraduate student involvement. 110 of 127 respondents answered the question about graduate student involvement. 111 of 127 respondents answered the question about regular student attendance. Among respondents they outlined student involvement as follows:

### Undergraduate student involvement (N=113)

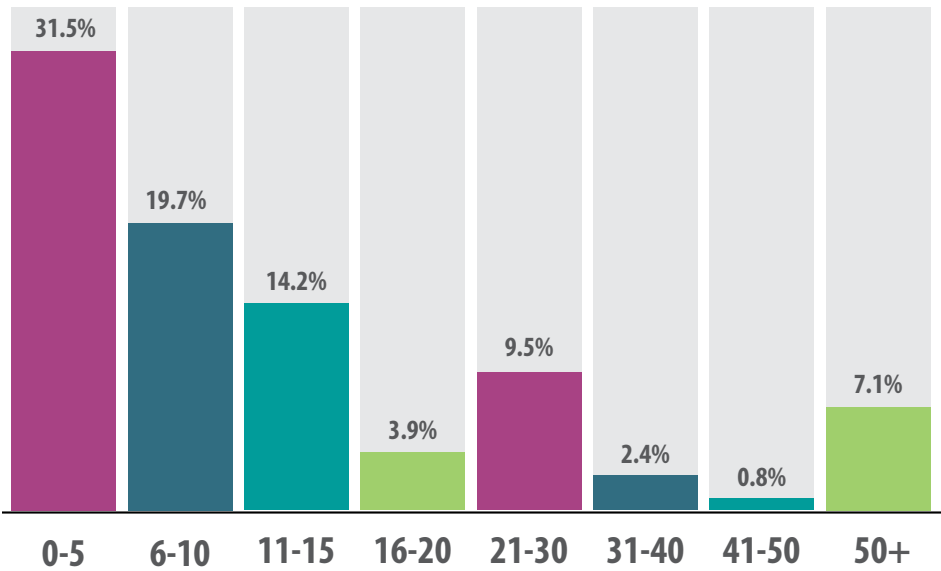


Chart 7. Undergraduate student involvement.

## 2017 Census and Definitions for Recovery Support in Higher Education

Undergraduate student involvement	Less than one year # (Started in 2017)	Less than one year % (Started in 2017)	1-3 years # (Started in 2016, 2015, 2014)	1-3 years % (Started in 2016, 2015, 2014)	4-6 years # (Started in 2013, 2012, 2011)	4-6 years % (Started in 2013, 2012, 2011)	More than 6 years # (Started in 2010 or prior)	More than 6 years % (Started in 2010 or prior)
Sample size	N=19		N=51		N=28		N=11	
0-5	8	42.11%	22	43.14%	7	25.00%	3	27.27%
6-10	3	15.79%	12	23.53%	8	28.57%	1	9.09%
11-15	2	10.53%	11	21.57%	4	14.29%	0	0.00%
16-20	1	5.26%	2	3.92%	1	3.57%	1	9.09%
21-30	2	10.53%	2	3.92%	6	21.43%	2	18.18%
31-40	1	5.26%	1	1.96%	0	0.00%	0	0.00%
41-50	0	0.00%	0	0.00%	0	0.00%	1	9.09%
50+	2	10.53%	1	1.96%	2	7.14%	3	27.27%
No Response (17)								

Table 14. Undergraduate student involvement by year program started.

### Graduate student involvement (N=110)

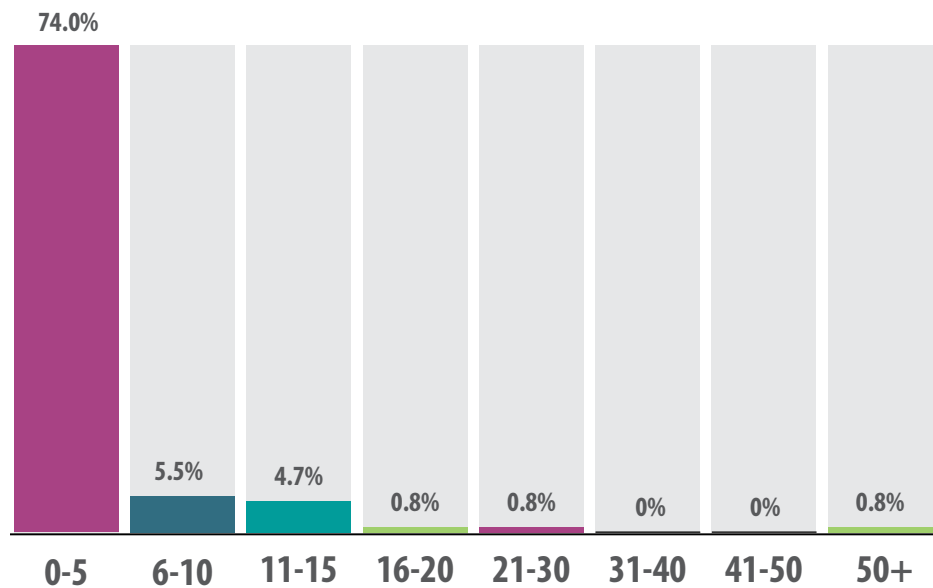


Chart 8. Graduate student involvement.

## 2017 Census and Definitions for Recovery Support in Higher Education

**Regular student  
attendance (N=111)**

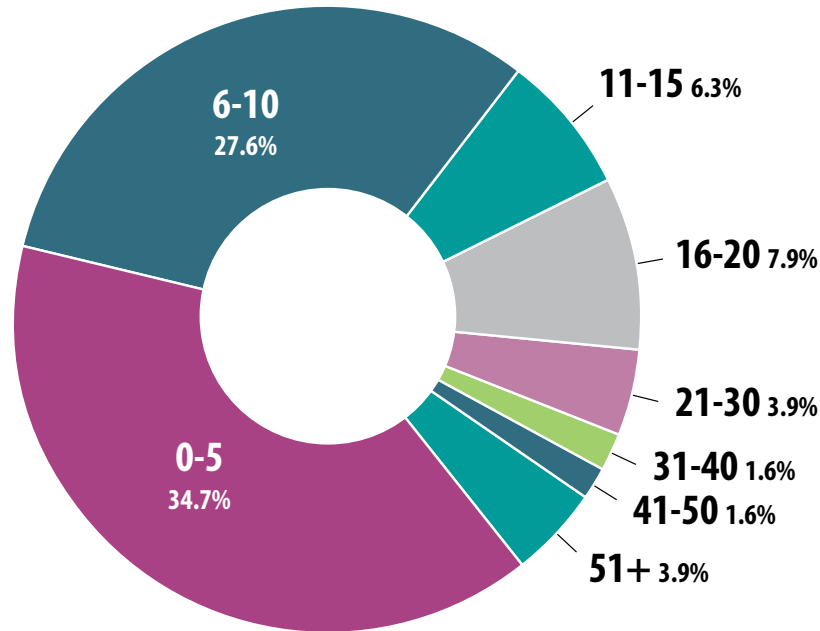


Chart 9. Regular student attendance.

### Student participation requirements

The collegiate recovery census prompted respondents to answer the following four questions regarding student participation requirements: (1) “What are your student participation requirements?”, (2) “Are students required to fill out an application to participate?”, (3) “Is there a minimum requirement for abstinence in order to participate?”, and (4) “Are there any other requirements for participation? Respondents then selected from the following options: For question 1: This program is open to any student; Students must live a substance-free lifestyle in order to participate; Students must be in recovery from a substance use disorder in order to participate; and Other. Questions 2-4 were yes or no questions. 113 of 127 respondents answered the question about student participation requirements. 111 of 127 respondents answered the question about filling out an application. 112 of 127 respondents answered the question about minimum abstinence requirements. 108 of 127 respondents answered the question about other program requirements. Additionally, included below are student participation requirements by stage. This view of the data is offered to help assess whether stage-based trends exist in student participation requirements. Among respondents they outlined participation requirements as follows:

Student participation requirements	# (All)	% (All)	# (Early stage)	% (Early stage)	# (Mid stage)	% (Mid stage)	# (Late stage)	% (Late stage)
This program is open to any student.	51	40.16%	26	50.00%	21	51.22%	4	21.05%
Students must live a substance-free lifestyle in order to participate.	9	7.09%	3	5.77%	1	2.44%	4	21.05%
Students must be in recovery from a substance use disorder in order to participate.	46	36.22%	20	38.46%	17	41.46%	9	47.37%
Other	7	5.51%	3	5.77%	2	4.88%	2	10.53%
No Response (14)								

Table 15. Student participation requirements and student participation requirements by stage.

Students required to fill out an application to participate

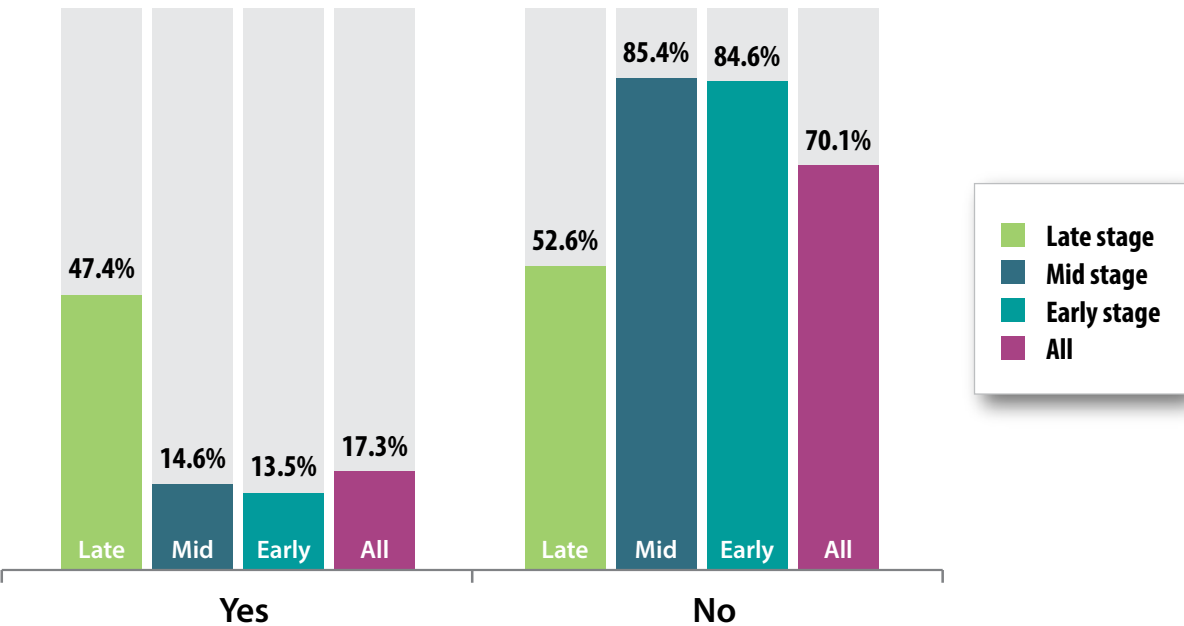


Chart 10. Application requirements by stage.

Minimum requirement for abstinence in order to participate

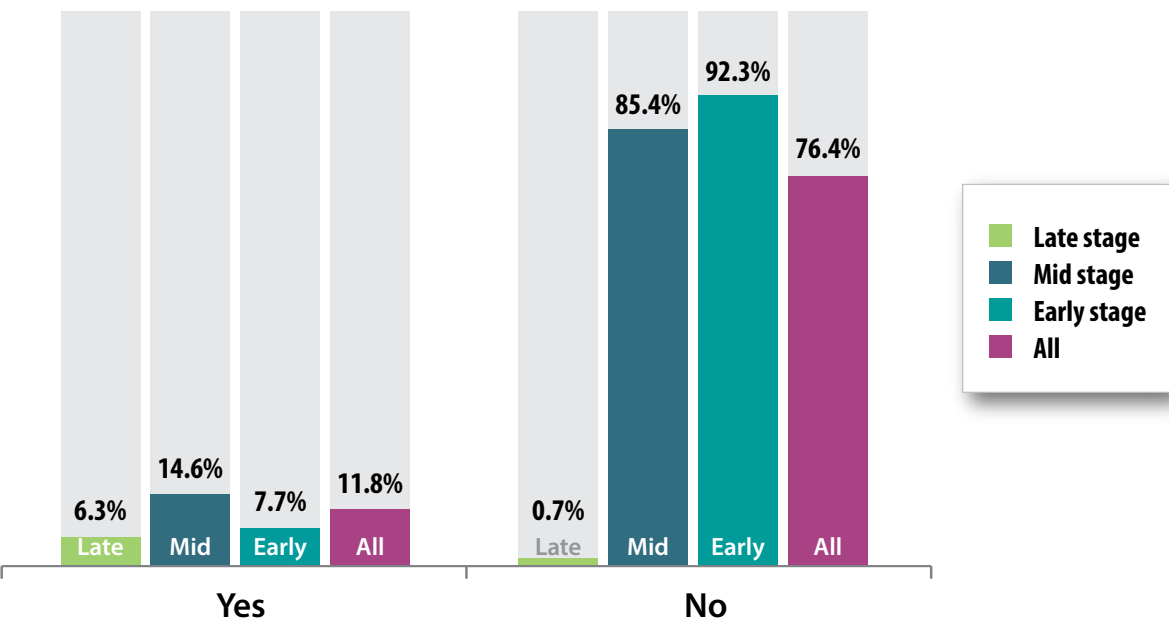


Chart 11. Minimum abstinence requirement by stage.



# 2017 Census and Definitions for Recovery Support in Higher Education

Respondents described their minimum abstinence requirements as follows:

Minimum abstinence requirements (N=10)	#
2 weeks	1
3 months	5
6 months	2
12 months	1
Required to be working towards an abstinence-based recovery model.	1

Table 16. Minimum abstinence requirements.

## Other requirements for participation

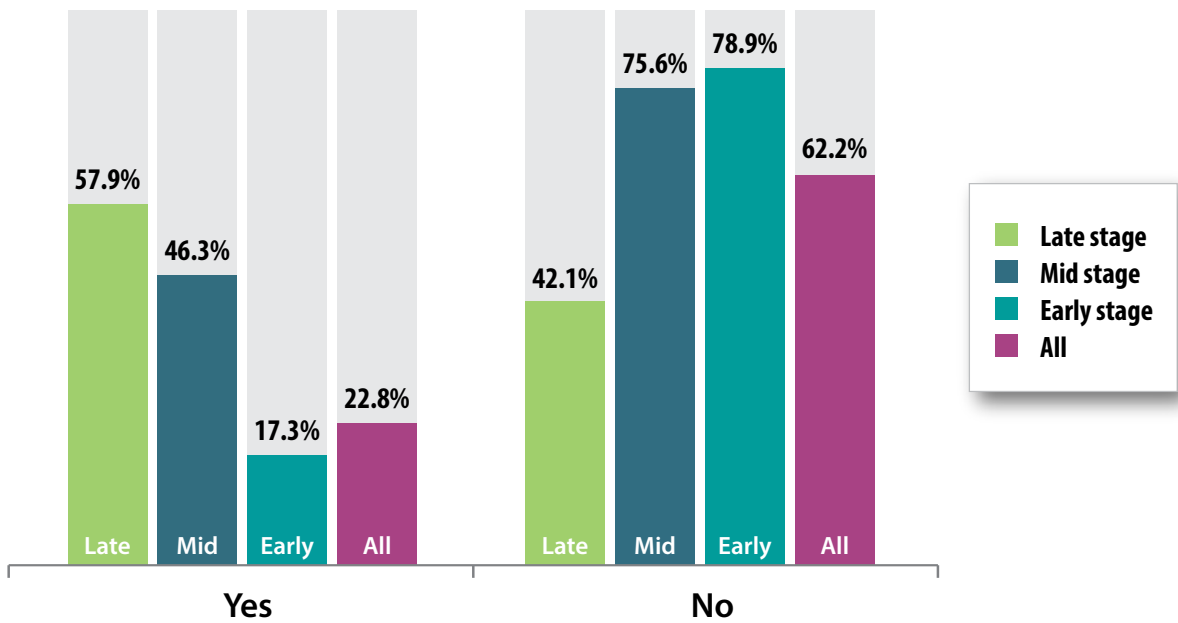


Chart 12. Other requirements for participation by stage.

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Other requirements for participation (N=29)*	#
3 months of recovery to get key access to space	1
6 months of recovery to be eligible for housing	1
Attendance/engagement	10
CAPS meetings	1
Commitment to remain abstinent/remain abstinent	10
Community service	1
Current student of school/enrolled in classes	5
Essay/letters of recommendation	2
Interview	1
Meeting with program staff	4
Signed contract/agreement	4
Supportive and respectful of the recovery of others	1
Working a recovery program/12-Step Meeting/Individual recovery plan	4
*Respondents listed more than one requirement	

Table 17. Other requirements for participation.

### Handling relapse

The collegiate recovery census prompted respondents to, “Describe how your program handles relapse.”

97 of 127 respondents answered the question providing a total of 137 due to multiple categories occurring in a single response. Because this question was open-ended researchers needed to create a taxonomy to codify the responses. Researchers created eleven categories to use when coding the data. They included: (1) Assessment and development of recovery/relapse protection plan, (2) Assessment and referral to services, (3) Case-by-case/individual basis, (4) Counseling, (5) No plan in place/no plan created yet/plan in development, (6) Peer mentorship and support, (7) Re-engagement in program, (8) Referral to services, (9) Staff mentorship and support, (10) Student suspended from program, and (11) Other. Among respondents they identified the method for handling relapse/return to use as follows:

TYR taxonomy for relapse/return to use procedures	#	% (N=97)
Assessment and development of recovery/relapse protection plan	12	12.37%
Assessment and referral to services	9	9.28%
Case-by-case/individual basis	19	19.59%
Counseling	4	4.12%
No plan in place/no plan created yet/plan in development	12	12.37%
Peer mentorship and support	10	10.31%
Re-engagement in program	8	8.25%
Referral to services	24	24.74%
Staff mentorship and support	25	25.77%
Student suspended from program	3	3.09%
Other	11	11.34%

## 2017 Census and Definitions for Recovery Support in Higher Education

Table continued from previous page

TYR taxonomy for relapse/return to use procedures	#	% (N=97)
Total number of unique responses	137	
Total number of respondents	97	

Table 18. Handling relapse.

To see all 137 unique responses reference Appendix II.

### Services and resources spaces

The collegiate recovery census prompted respondents to, “Describe your program’s space.” Respondents then selected from the following options: (1) The program has a dedicated space, which is only available to participating students, (2) The program has a space that is shared with other groups, but is consistently available, (3) The space that the program uses varies; it is not consistently available, (4) No space available for the program. 111 of 127 respondents answered the question. Additionally, included below is spaces by year program started. This view of the data is offered to help assess whether time-based trends exist in spaces. Among respondents they identified their spaces as follows:

Services and resources spaces	# All	% All	Less than one year # (2017)	Less than one year % (2017)	1-3 years # (2016, 2015, 2014)	1-3 years % (2016, 2015, 2014)	4-6 years # (2013, 2012, 2011)	4-6 years % (2013, 2012, 2011)	More than 6 years # (2010 or prior)	More than 6 years % (2010 or prior)
The program has a dedicated space, which is only available to participating students.	52	40.94%	5	26.32%	19	38.78%	20	71.43%	6	60.00%
The program has a space that is shared with other groups, but is consistently available.	36	28.35%	9	47.37%	18	36.73%	7	25.00%	2	20.00%
The space that the program uses varies; it is not consistently available.	17	13.39%	3	15.79%	10	20.41%	1	3.57%	1	10.00%
No space available for the program.	6	4.72%	2	10.53%	2	4.08%	0	0.00%	1	10.00%

Table 19. Services and resources spaces by year services and resources started.

The survey that was deployed at the NASPA conferences asked respondents to name the services and resources being offered at their institution as well as indicate the services and resources they are considering offering in the future. This survey had 79 total respondents from 58 unique institutions.

### Department or function responding

The NASPA survey prompted respondents to answer, “Which department or function do you represent?” 79 of 79 respondents answered the question. College and universities call their campus departments by unique names, often referring to similar functions. As a result, researchers needed to codify the responses. Researchers created 17 categories to use when coding the data. Among respondents they identified the department or group responsible for their services and resources as follows:

Department or function	# of responses	% of responses (N=79)
Academic advising	3	3.80%
Admissions	3	3.80%
Athletics/campus recreation	2	2.53%
Campus leadership/dean of students/office of the president	6	7.59%
Career services	1	1.27%
Community standards	1	1.27%
Disability/accessibility services	2	2.53%
Diversity and inclusion	3	3.80%
Faculty	1	1.27%
Food service	1	1.27%
Recruitment	1	1.27%
Residential life/housing	12	15.19%
Student	3	3.80%
Student affairs/student services	9	11.39%
Student health/wellness/counseling	17	21.52%
Student involvement/activities	10	12.66%
Other	4	5.06%

Table 20. Department or function responding to NASPA survey.

Current service and resource offerings

The NASPA survey prompted respondents to, “Please review the definitions below and share which one(s) best describe the current programs or services you have available for students in recovery.” Respondents then selected from the following options: (1) Collegiate Recovery Community, (2) Collegiate Recovery Program, (3) Collegiate Recovery Residency Program, (4) Young Adult Intensive Outpatient Program (IOP), (5) Treatment and Education Program, (6) Transitional Living/Recovery Housing and Education Program, and (7) Recovery Support Referral. 79 respondents made 103 definition selections. Among respondents they defined their recovery support services and resources as follows:

Current services and resources offered by NASPA respondents

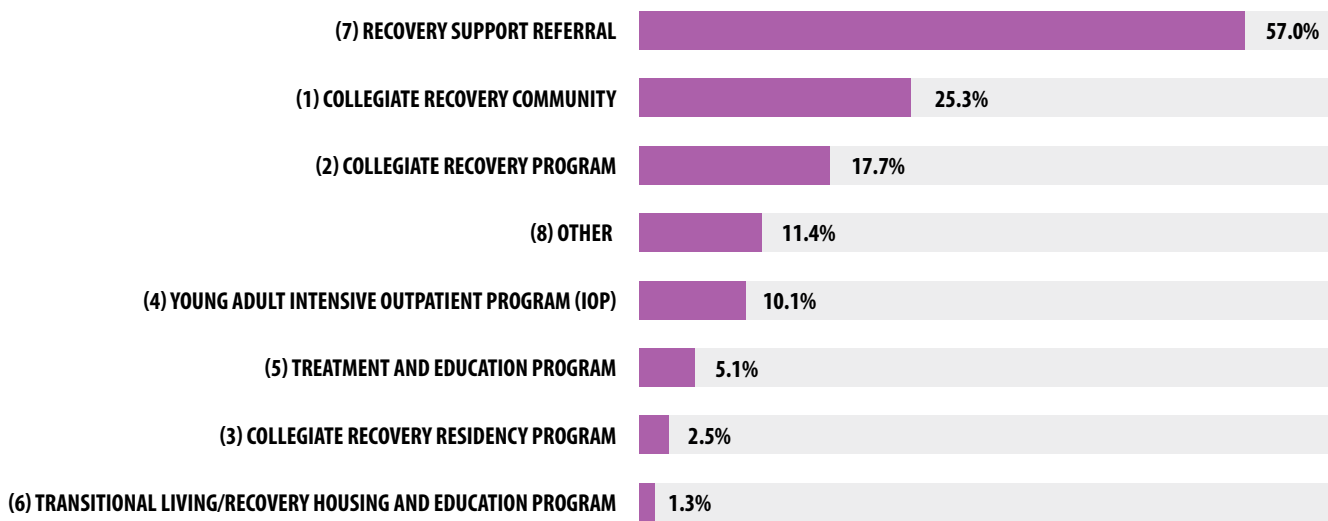


Chart 13. Current services and resources offered by NASPA respondents (N=79).

Nine respondents selected other and wrote in their responses. Only three of the responses offered details other than I don’t know, None, N/A. Those three responses included general counseling, refer out to community partners, and we recently started a committee dedicated to creating and growing recovery services for students.

## 2017 Census and Definitions for Recovery Support in Higher Education

### Institutions indicating they are offering a Collegiate Recovery Community (CRC), Collegiate Recovery Program (CRP), or Collegiate Recovery Residency Program (CRRP)

The following 17 institutions indicated via the NASPA survey they are currently offering a CRC, CRP or CRRP and are not currently recognized as doing so by ARHE or TYR. These institutions included the following:

Institutions offering CRC, CRP, or CRRP	CRC	CRP	CRRP
Boston College		X	X
Creighton University	X	X	
DePaul University	X		
Doane University	X		
Fort Hays State University	X	X	
Massasoit Community College	X		
Merrimack College	X		
North Shore Community College	X		
Red Rocks Community College	X		
Rogers State University	X		
Saint Leo University	X		
Southern New Hampshire University		X	
Texas A&M University	X		
University of Kansas Medical Center		X	
University of Nebraska Lincoln	X	X	
Warren Wilson Colleges	X		
Western New Mexico University		X	

Table 21. Institutions responding to the NASPA survey indicating they are offering a CRC, CRP, or CRRP.

### Additional current service and resource offerings

The NASPA survey prompted respondents to, “Please offer additional comments or descriptions of programs or services you are currently offering.” 28 respondents provided a response. Researchers created a taxonomy to codify the responses; to see a complete list of responses see Appendix VI. Among respondents they are also currently offering:

Additional current offerings	#	% (N=28)
Counseling	10	35.71%
Intervention/prevention	7	25.00%
Mutual aid/peer support	3	10.71%
Referral	4	14.29%
Student Group	3	10.71%
Other	6	21.43%

Table 22. Additional current offerings of NASPA respondents.

### Future services and resources under consideration

The NASPA survey prompted respondents to, “Please review the definitions below and share which one(s) best describe the programs or services you are considering offering for students in recovery in the next few years.” Respondents then selected from the following options: (1) Collegiate Recovery Community, (2) Collegiate Recovery Program, (3) Collegiate Recovery Residency Program, (4) Young Adult Intensive Outpatient Program (IOP), (5) Treatment and Education Program, (6) Transitional Living/Recovery Housing and Education Program, and (7) Recovery Support Referral. 79 respondents made 110 selections. Among respondents they identified the following:

Future services and resources under consideration	#	% (N=79)
Collegiate Recovery Community	23	29.11%
Collegiate Recovery Program	23	29.11%
Collegiate Recovery Residency Program	7	8.86%
Other - Write In (Required)	5	6.33%
Recovery Support Referral	31	39.24%
Transitional Living/Recovery Housing and Education Program	7	8.86%
Treatment and Education Program	7	8.86%
Young Adult Intensive Outpatient Program (IOP)	7	8.86%

Table 23. Future services and resources under consideration by NASPA respondents.

Five respondents selected other and wrote in their responses. Their responses included: None that I know of, Currently unaware of institutional plans in this area, I don’t believe they’re looking at changing the program, Still deciding, and Pdes.

### Additional future services and resources being considered

The NASPA survey prompted respondents to, “Please offer additional comments or descriptions of programs or services you are considering offering in the next few years.” 22 respondents provided a response. Respondents are considering offering the following:

Additional future services and resource being considered	# of respondents
Academic advisor	1
Additional counseling services	1
Alcohol education	1
Designated staff	1
Funding will make it difficult to do more than we currently are doing.	1
I am rechecking the same box because I feel we need to do better. We need more resources as our student population increases.	1
I have heard conversation over this program if we do not already have it.	1
Prevention of overdose	1
Recovery assistance programs	1
Recovery community, learning community	1
Scholarship, mentorship.	1
Sexual violence survivor support	1
Some of our priorities currently are to help the Recovery Community host more socials, expand awareness about the community and recovery, and find ways to develop a sustainable program (space, staffing, finances).	1
Student support groups, online engagement	1
Students go through alcohol edu training at the beginning of every year but that’s about it	1
While we are a dry campus would love to see a floor dedicated to sobriety or alcohol-free life style	1
Not sure/Don’t know	6

Table 24. Additional future services and resources being considered.



# ANALYSIS OF FINDINGS

### Substantiate the assumption

The first objective of this research was to substantiate the assumption that the collection of services and resources that schools use to support students in recovery varies from campus to campus. This assumption can be substantiated using three data points: (1) definitions, (2) area of focus, and (3) program practices. 59.84% of survey respondents indicated they had a Collegiate Recovery Program, 37.8% of respondents indicated they had a Collegiate Recovery Community, 28.35% of survey respondents indicated they were making referrals, and 11.02% of survey respondents indicated they have a Collegiate Recovery Residency Program. These results support the assumption that different campuses are doing different things to support students in recovery.

87.40% of respondents indicated an area of focus for their services and resources was peer support, 74.02% of respondents indicated an area of focus for their program was social activities and sober fun, 34.65% of respondents indicated an area of focus for their services and resources was counseling or clinical support, and 22.05% indicated an area of focus for their services and resources was other. Again, these results support the assumption that different campuses are doing different things to support students in recovery; however to a lesser degree than the definitions. The vast majority of services and resources are peer support based and offering social activities and sober fun. Interestingly, overall area of focus is not correlated with services and resources stage. The last data set used to substantiate the assumption that the collection of resources and services that schools use to support students in recovery varies from campus to campus is practices. The most common practices identified were advocacy efforts undertaken for student needs (70.87%), coordinate events to raise awareness on campus (74.02%), organize sober social events for the recovery community and beyond (72.44%). The least common practices identified were arrange for access to gyms, sports facilities, or intramural activities (14.17%), connect to job-placement, internship, and career day program (14.17%), mentor high school students in recovery (7.09%), and offer relapse training to staff and students (12.60%). All of the practices offered were selected by one or more institutions indicating that similarities and commonalities do exist among institutions; however, customization is taking place at a local level. These three data points substantiate the assumption that variation in services and resources exist and thus an extended definitional framework is needed for the field of collegiate recovery.

### Definitional framework for recovery support services and resources in higher education

The rapid expansion of recovery support services and resources in educational settings over the past five years can certainly be viewed in the context of the broader addiction and opioid epidemic taking hold in the U.S. As governmental agencies, public health professionals, and community-based organizations race to identify and promote access to effective behavioral health and substance use treatment options for 20.8 million Americans, another 23.5 million Americans are either initiating or maintaining an often-challenging life in recovery (Facing Addiction in America 2016; Partnership for Drug-Free Kids 2010). This is most challenging for young adults who have limited time and experience with aftercare and recovery maintenance and are facing enormous obstacles to reclaiming educational goals and aspirations.

The ability to distinguish among a variety of recovery support services and resources, in both secondary and higher education, has emerged as an important activity when it comes to supporting students who are in recovery and attending educational institutions. Community leaders, educators, parents, and, in particular, students themselves need a way to recognize and access a variety of services and resources that can assist within the continuum of care—from prevention to identification, to treatment, to recovery support. Equally important, program administrators and professionals need to be able to view the national landscape for support and care

## 2017 Census and Definitions for Recovery Support in Higher Education

and see the critically important points of entry for young adults looking to obtain desired educational degrees and join a legion of people in stable and rewarding recovery. All of this requires the adoption of common terminology and a clear understanding of the distinguishing characteristics among a variety of recovery support options present or emerging at educational institutions. As one respondent to the census commented:

*“For new universities wanting to support students in recovery, it would be nice to have these definitions to know what to work toward based on the resources a campus can provide.”*

The 2017 Collegiate Recovery Census included a set of definitions drafted to describe the recovery support services and resources believed to be currently available for students at institutions of higher education. These preliminary definitions were derived from a review of informational and programmatic materials made available to those seeking such support services and resources. (Appendix III lists the informational and programmatic materials referenced to draft preliminary definitions.) The survey asked respondents to select a best-fit definition for available services and resources. More than one selection could be made and all respondents had the opportunity to provide comments on the presented definitions.

127 survey respondents from 118 unique institutions provided a response. In instances where there were multiple responses for an institution, all selected definitions (illustrative of available services and resources) were combined to reflect a single opinion on institutional offerings. In some cases, respondents from an institution provided different definitional selections. Researchers accepted all selections with the assumption that individual administrators and leaders may have differing views as to the nature of what is available for students in recovery at the institution.

The analysis provided attempts to use reporting data and respondent comments as a means to strengthen the preliminary definitional framework and devise a system for better classifying recovery support services and resources at institution of higher education. In doing so, researchers hope to encourage professionals and organizations to provide general public education on the types of recovery support services and resources available for all students. Additionally, there is an intent to inform online resource directories and search engines to enhance access to appropriate types of recovery support services and resources when returning to or attending educational institutions.

As a starting point, researchers began with an analysis of responses specific to preliminary definitions for “collegiate recovery programs and services”. These included:

**Collegiate Recovery Community** – Emergent efforts by students in recovery from substance misuse or dependency to create safe, supportive learning environments at an institution of higher education. The primary components of collegiate recovery communities are:

- Mutual aid support groups near or on campus for students in recovery and students or other committed individuals who gather together socially, participate in sober activities; and,
- Peer recovery support in a community setting.

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**Collegiate Recovery Program** – Programs offered at institutions of higher education that provide safe, supportive learning environments for enrolled students in recovery from substance misuse or dependency. The primary components of collegiate recovery programs are:

- Mutual aid support groups near or on campus for students in recovery;
- Physical space for students to gather together socially, participate in sober activities, and experience peer recovery support in a safe environment;
- Institutional acceptance and support of the collegiate recovery program and the academic goals of students in recovery;
- Staff, counselors, or student leaders who are dedicated to the collegiate recovery program; and,
- Peers, recovery coaches, or counselors who are available for recovery support.

**Collegiate Recovery Residency Program** – Collegiate recovery programs that offer recovery housing options for students in recovery enrolled at an institution of higher education.

The census data indicates that 61.02% (72 of 118) of responding institutions identified having a Collegiate Recovery Program, 38.98% (46 of 118) identified having a Collegiate Recovery Community (38.65%), and 10.17% (12 of 118) identified having a Collegiate Recovery Residency Program.

### Recovery support services and resources by definition

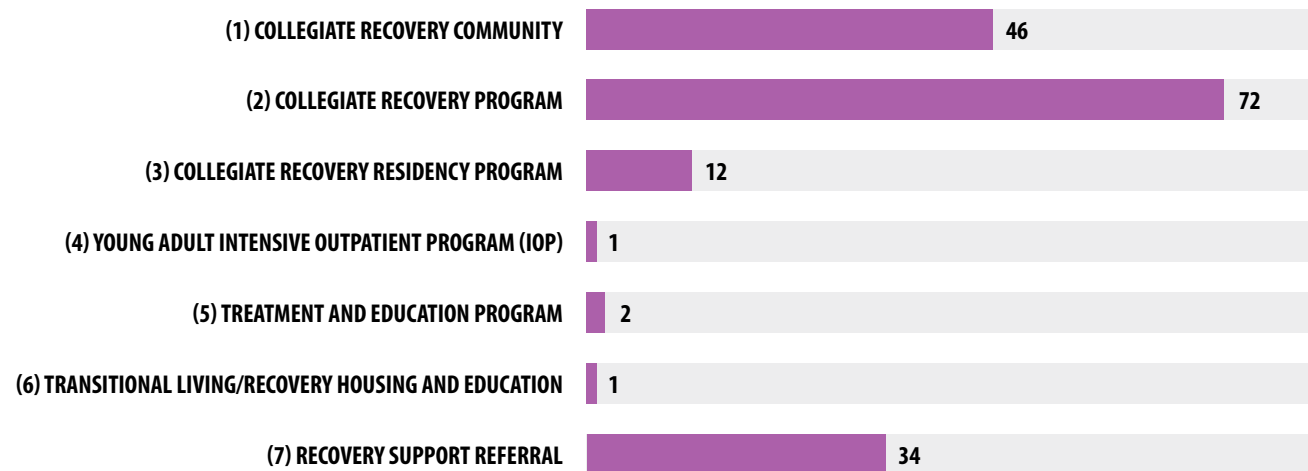


Chart 14. Recovery support services and resources by definition (N=118).

## 2017 Census and Definitions for Recovery Support in Higher Education

Percentage of respondents that identify with a specific area of focus and include other programs and services by definition

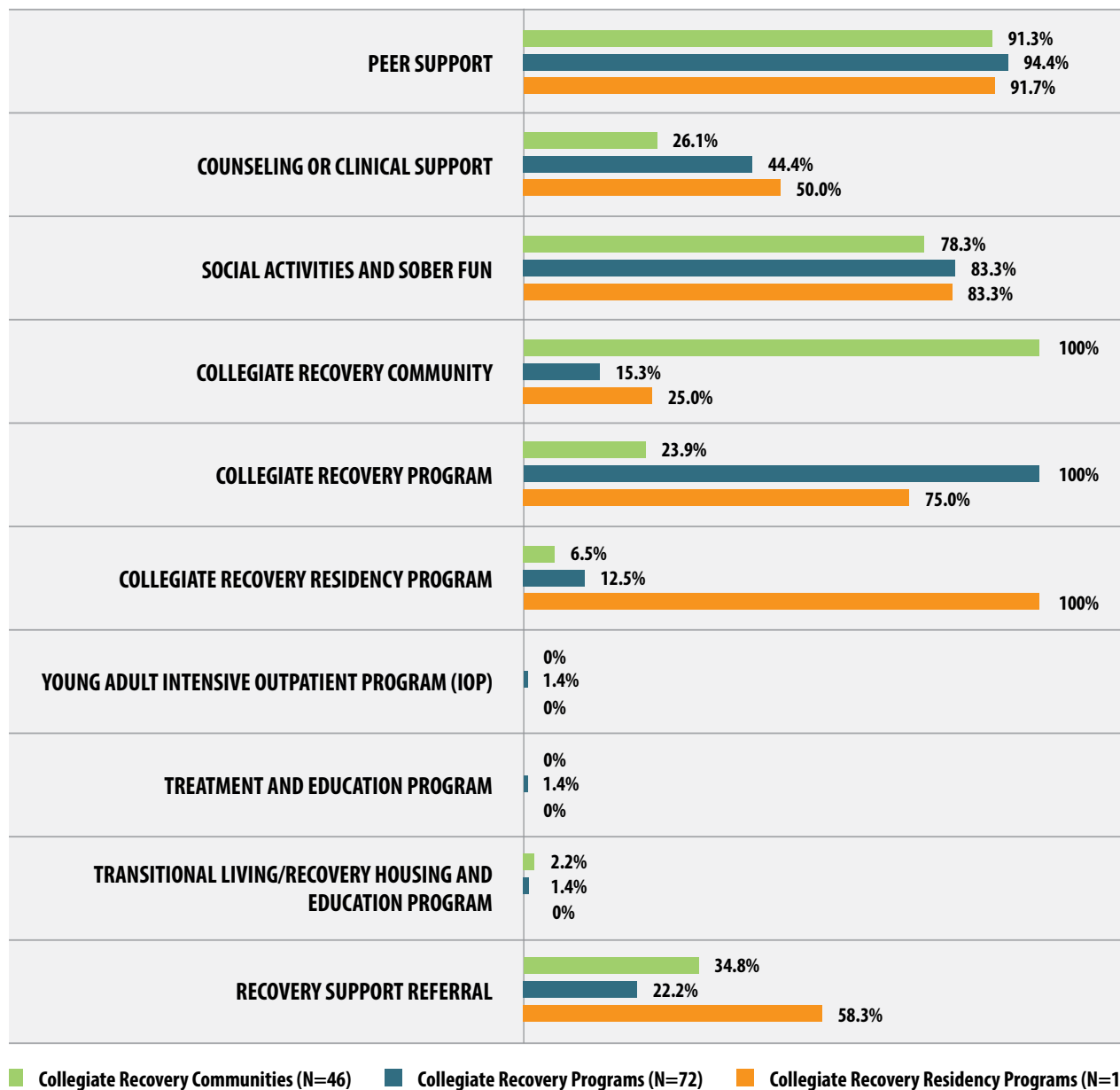


Chart 15. Percentage of respondents that identify with a specific area of focus and include other programs and services by definition.

36 of the 118 reporting institutions indicated more than one definitional response. For this multi-definitional response sub-group, having a Collegiate Recovery Program was indicated in 69.44% (25 of 36) of the sub-group responses and having a Collegiate Recovery Community was indicated in 61.11% (22 of 36) of the sub-group responses. In terms of the total survey population, 21.19% of Collegiate Recovery Programs and 18.64% of Collegiate Recovery Communities Programs were one of a combination of services and supports available on campus for students in recovery. Of interest is the reporting that only 30.55% (11 of 36) of the sub-group responses reflected a combination of a Collegiate Recovery Program and a Collegiate Recovery Community. This

## 2017 Census and Definitions for Recovery Support in Higher Education

is reflective of only 9.32% (11 of 118) of all responding institutions having a Collegiate Recovery Program and a Collegiate Recovery Community. The more common combination of services and resources was the indication of having collegiate recovery support (Collegiate Recovery Community, Collegiate Recovery Program, or Collegiate Recovery Residency Program) with Recovery Support Referral services available at the institution. For the reporting sub-group, 75% (27 of 36) indicated having Recovery Support Referral services. The most common combination was having a Collegiate Recovery Community with Recovery Support Referral services (40.7% or 11 of the 27 combinations).

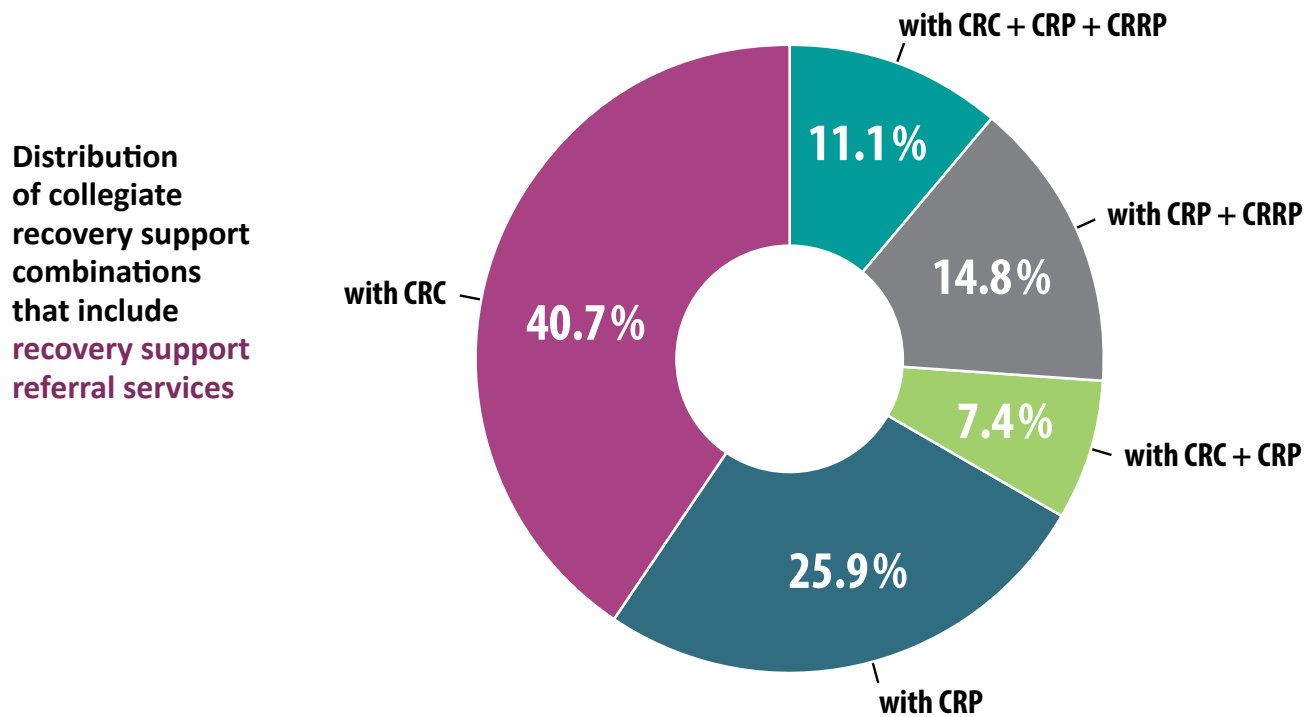


Chart 16. Distribution of collegiate recovery support combinations that include Recovery Support Referral services (N=27).

For reference, the preliminary definition provided for Recovery Support Referral was:

**Recovery Support Referral** – Colleges and universities that offer some level of substance misuse prevention services and referral-based recovery support resources for enrolled students. These services and resources may include:

- Alcohol & Other Drug Prevention (AOD) Programs, which offer screening and interventions for substance misuse;
- Counseling and Psychological Services (CAPS), which offer clinical services for behavioral and mental health;
- Student Health and Wellness Centers, which provide referral services for mutual aid support groups and general wellness classes; and,
- Resource sites, which provide listings of recovery support group meetings and services near campus.

## 2017 Census and Definitions for Recovery Support in Higher Education

Recovery Support Referral was the third highest indicated service and resource available at responding institutions of higher education. Specifically, referral services are indicated as being offered at 28.81% (34 of 118) of all reporting institutions and 75% (27 of 36) of those institutions that indicate multiple services and resources. An area of interest for researchers is the prospective role that referral services play in terms of influencing or encouraging collegiate recovery efforts at institutions of higher education. A leading question is: Do institutions use referral services — commonly directed through on-campus AOD prevention services, counseling professionals, and student health and wellness centers — as a means to identify a need for direct support services for enrolled students in recovery? The following comments were submitted by respondents indicating that they offer Recovery Support Referral services:

*“We are working toward developing a strong Collegiate Recovery Program, and are developing relationships to ensure institutional support where before it was lacking.”*

*“We are working to develop a Collegiate Recovery Community with the help of TYR.”*

*“We have both the recovery support for referrals and the collegiate recovery program items in place. We also are working on recovery housing but don’t have it yet.”*

*“Many of these programs exist within the university but not within the collegiate recovery program.”*

*“We meet some but not all of the criteria for having a CRP, rather than a CRC with Recovery Support Referrals. There is part-time space for students in recovery, very part-time staff, and only nominal institutional acceptance. I think an in-between category would be really useful.”*

A few observations can be made when examining these comments in conjunction with survey data. First, for those institutions offering Recovery Support Referral services, there is a sense that those services compliment or directly contribute to collegiate recovery support on-campus. Of the 34 institutions indicating that they provided Recovery Support Referral, only six indicated no other services and supports. Among those six, comments indicated they were working toward an early stage of services and resources. A second observation is reflected in the comments themselves. There is an indication that there is a developmental continuum of recovery support services and resources. This would be reflective of a laddering of services based upon intensity of need, and institutional commitment. Whereas a referral service such as an online directory of community resources may be on the lower end of institutional commitment, the offering of dedicated recovery housing may be on the upper end of commitment. This plays out in survey data which shows that institutions offering a Collegiate Recovery Residency Program (10.17% of responding institutions) report five years as the median number of years serving students in recovery versus those institutions offering Recovery Support Referrals (28.81% of responding institutions) which report three years as the median number of years serving students in recovery. Finally, the last comment demonstrates this idea of finding the right mix for supporting and serving students in recovery. It also illuminates the consideration of a collegiate recovery continuum — from a community of people, to finding referral sources for support, to a more formal programmatic outlook.



## 2017 Census and Definitions for Recovery Support in Higher Education

There is a known interest within the field to better understand the distinctions between a Collegiate Recovery Community and a Collegiate Recovery Program. Researchers offered each as a distinct definition in order to test a few basic assumptions regarding these two terms, which appear in informational and promotional materials describing national collegiate recovery services and resources. Dispensing with any attempt to qualify the origins of each term, researchers chose to present both options and then evaluate census survey data and commentary.

An initial assumption was the idea that a Collegiate Recovery Community was an “emergent effort by students” and served as a prerequisite for or often led to a more formal Collegiate Recovery Program. From a survey data perspective, this would be supported by median stages of development being reported as in early stages for institutions offering Collegiate Recovery Communities and in mid stages of development for those offering Collegiate Recovery Programs. However, an examination of comments submitted appears to contradict this assumption. Specifically, three comments were submitted by institutions just starting to serve and support students in recovery. Of those three, one identified itself as a Collegiate Recovery Program, one as a Collegiate Recovery Community, and one as a Collegiate Recovery Program with an “emergent CRC.”

Further, these additional comments accompanied reporting of a Collegiate Recovery Community:

*“We also have a physical space on campus for students to gather socially, participate in sober activities, and experience peer recovery support in a safe environment.”*

*“Counselor provides program leadership, administration, referral resources, and group facilitation.”*

Researchers believe that those organizing and leading recovery services at institutions of higher education may be selecting a known collegiate recovery “descriptor” (community or program) based upon the general nature of the services and resources as they perceive it within the broader context of the recovery support field. The selection of “community” as a descriptor may be indicative of the emergence of “recovery communities” and Recovery Community Organizations (RCOs). Here, the common description of a recovery community is understood to be a network of individuals who share a common goal of lifelong sobriety and offer support and fellowship to their peers. Alternatively, the selection of “program” as a descriptor may be used to denote institutional authority or acceptance with the connotation of a more structured service for students enrolled at the college or university. Both descriptors appear to offer viable support systems for students in recovery in higher education.

Census data provides further insight into the interconnected nature of Collegiate Recovery Communities and Collegiate Recovery Programs. Of the 72 institutions that report having a Collegiate Recovery Program, 15.28% (11 of 72) also report having a Collegiate Recovery Community. Of those 11 institutions reporting both a Collegiate Recovery Program and Collegiate Recovery Community, two of the responses reflect reporting from multiple survey respondents. In each case, individual institutional respondents made different definitional selections (some choosing program and some choosing community descriptors). This small sample size reinforces the idea of various perceptions of the same support services and resources, even when provided with explicit criteria for definitional selection.





## 2017 Census and Definitions for Recovery Support in Higher Education

As such, researchers recommend that the final definitional framework provide for both descriptors with some criteria modifications based on submitted comments. The binding concept, however, is the foundational term “collegiate recovery.” For resource classification purposes, researchers will use “collegiate recovery” as the primary resource category (similar to recovery high schools) and allow for sub-term descriptors of community, program, and residence to denote the characteristic of collegiate recovery support.<sup>5</sup>

In terms of the inclusion of “residence” as a prospective term descriptor, 10.17% (12 of 118) of responding institutions reported having a Collegiate Recovery Residency Program. Of those institutions, 75% also reported having a Collegiate Recovery Program and 58.33% reported having Recovery Support Referral services. Based on submitted comments regarding the nature of referral support services potentially available, researchers believe there is an importance in making the distinction between “substance-free housing” (a referral service) and a recovery residence that provides an alcohol and drug-free living facility for individuals in recovery from alcohol and other substance use disorders. It is recommended that the final definitional framework use the term Collegiate Recovery Program Residence to acknowledge area of focus on services for students in recovery (aligned with Collegiate Recovery Program objectives) and demonstrate the differentiation from substance-free housing, which may include residents not in recovery from a substance use disorder.

Finally, a limited number of institutions indicated the availability of a Young Adult Intensive Outpatient Program (1 of 118 reporting institutions), Treatment and Education Programs (2 of 118), or a Transitional Living/Recovery Housing and Education Program (1 of 118). Acknowledging that these are emerging services and resources on or near college campuses and these programs have not been TYR’s primary audience, researchers recommend sustaining their inclusion in the final definitional framework for school-based recovery services and resources in higher education. Based on submitted comments, it is further recommended that the label Transitional Living/Recovery Housing be refined to Transitional/Recovery Residence to align with field terminology denoting student-oriented settings that support recovery from substance use disorders and are distinct from institutional housing options available through a Collegiate Recovery Program Residence.

In summary, the following recommendations are being made for updating the preliminary definitional framework for school-based recovery support services in higher education:

1. Collegiate Recovery (CR) services and resources are to be accompanied by one of three descriptors available for self-selection by institutions of higher education based on the nature and characteristics of the services and resources supporting students in recovery. These include Collegiate Recovery Community (CRC) which is reflective of efforts by students who share a common goal of lifelong sobriety and offer peer recovery support; Collegiate Recovery Program (CRP) which has stated institutional acceptance and authority for the services and resources offered to enrolled students; and, Collegiate Recovery Program Residence (CRPR) which has institutional housing authority and is specific to students in recovery from a substance use disorder.
2. The Transitional/Recovery Residence and Education Program definition should clarify authority distinct from the university and promote the idea that living settings are student-oriented. The classifying term should be Transitional/Recovery Residence and Education Program.

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5. Any classification recommendations that result from Transforming Youth Recovery studies in the field of school-based recovery support programs and services are reflected in the taxonomy of terms used for data classification within online applications utilizing [Capacitytype](https://help.capacitytype.com/article/53-listing-of-categories-and-tags) data and mapping services. The relevant taxonomy can be retrieved from <https://help.capacitytype.com/article/53-listing-of-categories-and-tags>, codes SB-0000.



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3. A number of comments were submitted suggesting that Recovery Support Referral services on-campus includes helping students with substance-free housing placements (not recovery-specific). This has been included in final definitional framework.
4. Classifying terms for emerging treatment and therapy programs that provide services specifically to students in recovery should be labeled for clarity as Outpatient Care and Education Program and Treatment and Education Program. This will allow for encompassing the broadest categories of distinct types of care that also maintain a focus on educational advancement.
5. Researchers will extend the existing definitional framework for school-based recovery support in secondary education to include definitions for services and supports in higher education. In doing so, researchers hope to provide the first look at continuing educational support for students in recovery in the U.S.<sup>6</sup>

Appendix IV provides the complete definitional framework for School-Based Recovery Support Programs and Services in Secondary and Higher Education.

### Update services and resources census data

#### Total number of institutions of higher education supporting students in recovery

As of March 2018, TYR is aware of 189 institutions of higher education supporting students in recovery in the U.S. This number varies from the number advertised on the ARHE website and the number advertised in Recovery Campus magazine, the two other known places that are capturing and making this information available. Through this study we have verified the existence of services and resources at these institutions through (1) completion of the 2017 Collegiate Recovery Census, (2) completion of the NASPA survey, (3) follow-ups with individual TYR grantees, or (4) Awareness of services or resources by TYR's technical assistance coordinator. Researchers recognize that this number is dynamic; however, an effort was made here to accurately record the number of active institutions to ensure the depth of the field is accurately conveyed.

#### Where services and resources exist

As of March 2018, TYR has verified that services and resources exist at the following 184 institutions:

1. Anne Arundel Community College, Collegiate Recovery Center
2. Arizona State University, Recovery Rising
3. Arizona State University, Recovery Rising at ASU Downtown Phoenix
4. Arizona State University, Recovery Rising at ASU Polytechnic
5. Arizona State University, Recovery Rising at ASU West
6. Arkansas State University
7. Auburn University, Collegiate Recovery Community
8. Augsburg College, StepUP Program
9. Baylor University Recovery Program
10. Boise State University, SOBER at Boise State
11. Boston College, Recovery and Sobriety Support
12. Boston University Collegiate Recovery Program

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6. Association of Recovery Schools. (2016). The State of Recovery High Schools, 2016 Biennial Report, Section 2. Denton, TX. Retrieved from [www.recoveryschools.org](http://www.recoveryschools.org)

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13. Brown University, Early Sobriety Group
14. Butler University, Counseling and Consultation Services
15. California State University, Chico, Students Seeking Recovery
16. California State University, Fresno, Bulldogs for Recovery
17. California State University, Long Beach, Beach Recovery
18. California State University, Monterey Bay, CSUMB Collegiate Recovery Effort
19. California State University, Stanislaus, Warriors for Recovery
20. California University of Pennsylvania, The Alcohol and Other Drug (AOD) Prevention Awareness Recovery Center
21. Cape Cod Community College, Students Achieving Recovery Together (START)
22. Central Piedmont Community College, Collegiate Recovery Community
23. Central Washington University, CWU Recovery Outreach Community (CWU-ROC)
24. Clayton State University, Loch in Recovery
25. College of Charleston, Collegiate Recovery Program
26. Community College of Philadelphia, Office of Collegiate Recovery
27. Creighton University
28. Dalton State College, Collegiate Recovery Community
29. DePaul University, Recovery Community
30. Dixie State University, Collegiate Recovery Program
31. Doane University
32. Drexel University Collegiate Recovery Community
33. Duke University, Student Wellness Center (DUWELL)
34. Duquesne University of the Holy Spirit
35. East Carolina University, ECU Collegiate Recovery Community
36. East Stroudsburg University of Pennsylvania, Wellness Education & Prevention - Collegiate Recovery Center
37. Eastern Illinois University, EIU Collegiate Recovery Community, Panthers United in Recovery
38. Eastern Michigan University, Students 4 Recovery
39. Eastfield College, Students in Recovery (SIR)
40. Emory University, ReStart Collegiate Recovery Program
41. Fairfield University, Recovery House & Collegiate Recovery Program
42. Florida Atlantic University, Collegiate Recovery Community at FAU
43. Florida International University, Panthers for Recovery
44. Fort Hays State University, Drug and Alcohol Wellness Network
45. George Mason University, All Recovery for Mason Students
46. George Washington University, Collegiate Recovery Program and Students for Recovery
47. Georgetown University, GU Collegiate Recovery Program
48. Georgia Southern University, Center for Addiction Recovery
49. Gonzaga University, Our Unique Recovery (OUR) House
50. Greenfield Community College, Community Resource Studio
51. Hampden-Sydney College, H-SC Recovery Community
52. Howard University, Collegiate Recovery Program
53. Indiana University Bloomington, Students in Recovery-Bloomington (SIRB)
54. Indiana University-Purdue University Indianapolis (IUPUI), Students in Recovery of Indianapolis (SIRI)



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55. Kennesaw State University, Collegiate Recovery Community at KSU
56. Kent State University, Collegiate Recovery Community
57. Longwood University, Counseling & Psychological Services
58. Lorain County Community College, CARE Center for Addiction Recovery and Students in Recovery Club
59. Louisiana State University, LaCASU Collegiate Recovery Community (CRC)
60. Loyola University Maryland, Cardoner Recovery Community
61. Marshall University, Marshall Recovery
62. Maryville University, Collegiate Recovery
63. Massasoit Community College
64. Mendocino College, Students 4 Recovery
65. Merrimack College, Hamel Health and Counseling Center
66. Michigan State University, Collegiate Recovery Community and Traveler's Club
67. Minneapolis Community and Technical College, Collegiate Recovery Program @ MCTC
68. Missouri State University, MSU-CRP Bears in Recovery
69. Mitchell College, Collegiate Recovery Program
70. Montana State University Bozeman, The Center for Recovering Students
71. Nash Community College, Collegiate Recovery Program
72. North Carolina A&T State University, Collegiate Recovery Community
73. North Carolina State University, Collegiate Recovery Community
74. North Dakota State University, Bison Recovery Community
75. North Shore Community College, Collegiate Recovery Community
76. Northampton Community College, Collegiate Recovery Program
77. Northern Arizona University, NAU Live Free Collegiate Recovery Program
78. Northwest Missouri State University, Sober in College
79. Ohio University, R.I.S.E (Recovery to Inspire, Share and Empower)
80. Oregon State University, Collegiate Recovery Community
81. Pace University, Counseling Center, Collegiate Recovery Community
82. Penn State University, Collegiate Recovery Community
83. Pratt Institute, Clean Cats (Pratt CRC)
84. Radford University, Collegiate Recovery Community
85. Red Rocks Community College, Behavioral Health Services
86. Rogers State University, Collegiate Recovery Community
87. Rutgers University, Alcohol and Other Drug Assistance Program
88. Saint Joseph's University, The Flock: Allies of Recovery
89. Saint Leo University, Collegiate Recovery Community
90. Saint Louis University, Collegiate Recovery Community (CRC)
91. Sam Houston State University, Kats 4 Recovery
92. San Diego State University, Aztecs for Recovery
93. Santa Clara University, Broncos In Recovery Collegiate Recovery Program
94. Santa Rosa Junior College, Santa Rosa, S4R (Students 4 Recovery)
95. Southeastern Louisiana University
96. Southern Connecticut State University



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97. Southern Methodist University, Collegiate Recovery Community
98. Southern New Hampshire University
99. Southwestern Community College, Connections Club
100. St. Cloud State University, Recovery Community
101. Stockton University, Recovery Housing at Stockton University
102. Stony Brook University, Center for Prevention and Outreach
103. Texas A&M University
104. Texas Christian University, TCU Students for Recovery
105. Texas State University, Student Recovery Alliance
106. Texas Tech University, The Center for the Collegiate Recovery Communities
107. The Ohio State University, Collegiate Recovery Community
108. The University of Arizona, Wildcats Anonymous
109. The University of Mississippi, Collegiate Recovery Community
110. The University of New Mexico, COSAP Collegiate Recovery Program
111. The University of Tennessee, Knoxville, Rocky Top Recovery Group
112. The University of Texas at Arlington, Center for Students in Recovery
113. The University of Texas at Austin, Center for Students in Recovery,
114. The University of Texas at Dallas, Center for Students in Recovery
115. The University of Texas at El Paso, UTEP Collegiate Recovery Program
116. The University of Texas at San Antonio, The Center for Collegiate Recovery
117. The University of Texas at Tyler, Center for Students in Recovery
118. The University of Texas Rio Grande Valley, UTRGV Collegiate Recovery Program
119. Towson University, Counseling Center, Collegiate Recovery Effort
120. Truckee Meadows Community College, T-RAP at TMCC
121. Tufts University, Collegiate Recovery Effort
122. University at Albany, Collegiate Recovery Program
123. University of Alabama at Birmingham, UAB Collegiate Recovery Community
124. University of Alabama, Collegiate Recovery Community
125. University of Alaska Anchorage, Transforming Youth Recovery Student Group
126. University of Arkansas, Razorback Recovery Community
127. University of California, Berkeley, SoBears: Students for Recovery
128. University of California, Davis, Aggie RISE (Recovery, Inspire, Support & Empower)
129. University of California, Irvine, Anteaters in Recovery
130. University of California, Merced, Bobcats for Recovery
131. University of California, Santa Barbara, Gauchos for Recovery
132. University of California, Santa Cruz, Slugs for Health and Growth and The Cove
133. University of Colorado Boulder, CU Collegiate Recovery Center
134. University of Connecticut, UConn Recovery Community (URC)
135. University of Dayton, Sober Flyers
136. University of Delaware, Collegiate Recovery Community at UD
137. University of Florida, Collegiate Recovery Community (UFCRC)
138. University of Georgia, Collegiate Recovery Community



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139. University of Hartford, HawkLife
140. University of Hawai'i at Mānoa, Mālama Project
141. University of Houston, Cougars in Recovery
142. University of Idaho, Student Addiction Support and Recovery Alliance (SASRA)
143. University of Iowa, Collegiate Recovery Program
144. University of Kansas Medical Center
145. University of Kentucky, Collegiate Recovery Community and CATS for Recovery
146. University of Maine, Black Bears for Recovery
147. University of Maryland, Terps For Recovery
148. University of Massachusetts Boston, Recovery Support Program and Students for Recovery
149. University of Massachusetts Dartmouth
150. University of Michigan, Collegiate Recovery Program
151. University of Missouri, Columbia, Sober in College (SiC)
152. University of Missouri, Kansas City, RooCovey
153. University of Nebraska Omaha, UNO Recovery Community
154. University of Nebraska-Lincoln, Campus Recovery Community
155. University of Nevada, Reno, Nevada's Recovery and Prevention Program (NRAP)
156. University of North Carolina at Asheville, Collegiate Recovery Community
157. University of North Carolina at Chapel Hill, Carolina Recovery Program
158. University of North Carolina at Charlotte, Collegiate Recovery Community (CRC)
159. University of North Carolina at Greensboro, Spartan Recovery Program
160. University of North Carolina at Wilmington, CRC Hawks
161. University of North Dakota, Been There Done That
162. University of North Texas, UNT Collegiate Recovery Program and Recovery Nest
163. University of Oregon, Collegiate Recovery Center
164. University of Pennsylvania, Quaker Peer Recovery
165. University of Pittsburgh
166. University of South Carolina, Gamecock Recovery
167. University of Southern Maine, Recovery Oriented Campus Center (ROCC)
168. University of Tampa, Recovery Community
169. University of the Sciences, Recovery Program
170. University of Utah, Recover at the U
171. University of Vermont, Catamount Recovery Program
172. University of Virginia, Hoos in Recovery (HIR)
173. University of Wyoming, Collegiate Recovery Program
174. Virginia Commonwealth University, Rams In Recovery
175. Virginia Tech, The Recovery Community @ Virginia Tech
176. Wake Forest University, WFU Choices
177. Warren Wilson College, Center for Substance Abuse Prevention
178. Washington University in St. Louis, WashU Recovery Group and Peer Health Educators
179. West Chester University, RAM Recovery
180. West Virginia University, WVU Collegiate Recovery Program

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181. Western Carolina University, Catamounts For Recovery
182. Western New Mexico University
183. Winona State University, WSU Recovery Warriors
184. Woodbury University, Healthy Living Program

As of March 2018, TYR believes that services and resources may also exist at the following 55 institutions; however, this was not verified as part of this research:

1. Buffalo State College, Collegiate Recovery Program
2. California State University, San Bernardino, Coyotes for Recovery
3. Carnegie Mellon University, CMU Collegiate recovery Community
4. Case Western Reserve University, Collegiate Recovery Community
5. Centenary University, Addiction Recovery Project
6. Clemson University, Clemson and Sober
7. Colorado State University-Pueblo, HART BEAT (Student Recovery Group)
8. Community College of Vermont
9. Cornell University, SOBER@Cornell
10. Georgia Institute of Technology (Georgia Tech), Collegiate Recovery Program
11. Georgia State University, Collegiate Recovery Community (CRC)
12. Grand Valley State University, Alcohol & Other Drug Campus Education Services (ACES)
13. Harvard University, Recovery Group
14. Illinois State University, ISU Collegiate Recovery Community
15. Jacksonville State University, Collegiate Recovery Community
16. James Madison University, Dukes in Recovery
17. Kansas State University, Counseling Services
18. Loyola Marymount University Los Angeles, Lions for Recovery (CRC)
19. Midland College Behavioral Health Center (MCBHC), Alcohol & Drug Abuse Counseling (ADAC)
20. Minnesota State University Mankato, College Recovery Community
21. Misericordia University
22. Mississippi State University, Collegiate Recovery Community
23. Missouri University of Science and Technology, Miners for Recovery
24. Montclair State University, Red Hawk Recovery Program
25. Montgomery County Community College
26. Monmouth University, Students in Recovery Club
27. Morehead State University, SIMPLE Collegiate Recovery Community (CRC)
28. North Carolina Central University, Alcohol and Other Drug Resource Center
29. Northern State University, Counseling Center
30. Rowan University
31. Santa Rosa Junior College - Petaluma, Students 4 Recovery
32. Schreiner University, Collegiate Recovery Effort
33. Slippery Rock University, Rock Recovery Living-Learning Community
34. Southern Oregon University, CORE: Community of Recovery in Education

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35. The College of New Jersey, Collegiate Recovery Community
36. The College of St. Scholastica, CLEAN Program
37. University of San Francisco, The Haven at USF
38. University of Southern California, The Haven at USC
39. University of California, Los Angeles, Bruins For Recovery (B4R)
40. University of California, Riverside, The Loft: Collegiate Recovery Community
41. University of California, San Diego, Triton Recovery Group
42. University of Central Florida, Collegiate Recovery Community
43. University of Central Missouri, Recovery Central
44. University of Denver, Health and Counseling Center (HCC)
45. University of Massachusetts Amherst, Collegiate Recovery Community
46. University of Miami, PIER 21
47. University of Minnesota Rochester, UMR ROC! (Recovery on Campus Community)
48. University of Minnesota, SOBER
49. University of Redlands, The Haven at Redlands
50. University of Southern Mississippi, Collegiate Recovery Community
51. University of Washington, Alcohol and Other Drug Education
52. University of Wisconsin - La Crosse, La Crosse Collegiate Recovery Program
53. University of Wisconsin - Madison, Live Free
54. Vanderbilt University, Vanderbilt Recovery Support (VRS)
55. Washington and Lee University, Washingtonian Recovery Community

And, in total, 19 community colleges were identified. These included:

1. Anne Arundel Community College, Collegiate Recovery Center
2. Cape Cod Community College, Students Achieving Recovery Together (START)
3. Central Piedmont Community College, Collegiate Recovery Community
4. Community College of Philadelphia, Office of Collegiate Recovery
5. Community College of Vermont
6. Eastfield College, Students in Recovery
7. Greenfield Community College, Community Resource Studio
8. Lorain County Community College, CARE Center for Addiction Recovery and Students in Recovery Club
9. Massasoit Community College, Collegiate Recovery Program
10. Mendocino College, Students 4 Recovery
11. Midland College Behavioral Health Center (MCBHC), Alcohol & Drug Abuse Counseling (ADAC)
12. Minneapolis Community and Technical College, Collegiate Recovery Program @ MCTC
13. Montgomery County Community College
14. Nash Community College, Collegiate Recovery Program
15. Northampton Community College, Collegiate Recovery Program
16. Santa Rosa Junior College - Petaluma, Students 4 Recovery
17. Santa Rosa Junior College - Santa Rosa, Students 4 Recovery
18. Southwestern Community College, Connections Club
19. Truckee Meadows Community College, T-RAP at TMCC



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As a result of this effort, when reporting the most holistic number of institutions offering recovery support services and resources researchers recommend using a range of 184-239 versus a finite number. If looking to report on only 4-year institutions, 19 should be removed from the range offered above altering the range to 165-220.

### Start year

From 1977 to 2010 the field grew incrementally, adding only zero or one program per year. In 2010, the field began to expand more quickly. The greatest growth has taken place over the past five years, beginning in 2013, where according to survey respondents, 10-20 new programs have started each year. However, we know that additional programs have started during this time due to data collected in the Capacity database. As a result, the trend in growth should be recognized in the field. Ultimately, this trend tells us that the field of collegiate recovery is long standing with roots starting 40 years ago; however, a disruption occurred in the field around 2013 causing the number of institutions offering services and resources to expand greatly. A couple of outliers exist in this data set. One respondent from University of the Sciences indicated they started serving and supporting students in recovery in 1988 and one respondent from West Virginia University indicated they started serving and supporting students in recovery in 1980. These responses are inconsistent with the common historical discussion of collegiate recovery and additional efforts should be undertaken to assess the validity of these responses. Additionally, responses from West Virginia University, Rutgers University, and California State University Chico varied among respondents and thus, additional efforts should be undertaken to resolve these inconsistencies.

### Stage of development

As one might guess from start year data, the majority of recovery services and resources being offered are recent additions to campus communities. Among survey respondents, 40.94% indicated they are in the early stage of development and 32.28% indicated they are in the mid stage of development. This indicates that over 70% of respondents are offering recovery services and resources that have little or only a moderate amount of institutional support. Thus long-term sustainability is uncertain. Helping campuses to garner additional institutional support is of the utmost importance should the field want to sustain the growth it has experienced in recent years.

### Department or group responsible

The department or group responsible varies amongst respondents. This variance may have far reaching impacts influencing practices, area of focus, and more. In total there were nine different departments or groups identified as responsible for recovery support services and resources. 33.07% of respondents indicated Health & Wellness Services as the department or group responsible, 17.32% indicated Counseling & Psychological Services as the department or group responsible, and 16.54% indicated Student Affairs as the department or group responsible. Among services and resources started prior to 2010 the majority of respondents (54.55%) indicated Student Affairs as the department or group responsible. However, when looking at services and resources started in the past three years (2016 and prior) 35.82% indicated Health & Wellness Services as the department or group responsible and 23.88% indicated Counseling & Psychological Services as the department or group responsible. As the field continues to grow, it will be interesting to see if the trend away from Student Affairs and toward Health & Wellness Services and Counseling and Psychological Services continues.

### Faculty and staff involvement

The number of faculty and staff involved in the services and resources and the amount of time they can dedicate is correlated with the stage of development. As an institution increases endorsement of recovery support services and resources additional staff often follows. Late stage services and resources have the most faculty and staff involvement while early stage services and resources have the least faculty and staff involvement. Very



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few institutions (only 3.94%) are entirely student-led with no responsible faculty or staff while 14.17% have faculty/staff that volunteer their time. As services and resources look to move from early stage to mid stage and eventually late stage, a plan for increasing faculty and staff involvement is recommended to ensure that the services and resources are well run, respected, and sustainable. In the absence of faculty and staff, there is evidence in the field that emerging student leaders and new professionals can play critical roles in starting and leading recovery support; these individuals should be incorporated into plans for staffing in both the presence and absence of paid staff.

### Endorsement by university

71.65% of respondents indicated their services and resources are officially endorsed by the college or university, 15.75% indicated their services and resources were not officially endorsed by the college or university, and 12.60% of respondents did not provide a response. 100% of services and resources started in 2017 indicated they had been officially endorsed by the college or university while only 72.73% of services and resources started more than 6 years ago have been officially endorsed by the college or university. This may indicate that as the field of collegiate recovery has grown, it has become easier to garner endorsement earlier in the process. Additionally, peer pressure may be playing a role in helping leaders and decision makers of universities feel obligated to offer supports of this kind. For those who have not received endorsement, working toward endorsement is important for all institutions as this analysis suggests that endorsed programs are more sustainable in that they have more staff/faculty involved and identify with later stages of development. For those services and resources that have not achieved endorsement, a plan for achieving it is recommended to ensure that the services are sustained.

### Institutionalization by university

39.37% of respondents indicated their services and resources had been institutionalized, 46.46% indicated their services and resources had not been institutionalized, and 14.17% of respondents did not provide a response. Institutionalization is more difficult to achieve than endorsement as it is likely one needs to have demonstrated outcomes in order to be included in strategic planning and receive funding from a college or university. However, the data suggests that institutionalization is directly correlated with age of the services and resources. Among respondents, 35.29% of services and resources started in 2017 are institutionalized, 34.69% of services and resources started in 2016, 2015, and 2014 are institutionalized, 53.57% of services and resources started in 2013, 2012, and 2011 are institutionalized and 90.91% of services and resources started in 2010 or prior are institutionalized. Therefore, one can hypothesize that if one is able to have demonstrated outcomes over a seven-year period it is likely that their services and resources will achieve institutionalization.

### How services and resources help students stay alcohol and drug free

The recovery census asked an open-ended question regarding how services and resources help students stay alcohol and drug free. In total the responses were placed into fourteen categories and correlated to 22 of the 38 assets TYR has identified as important to starting and sustaining collegiate recovery services and resources.<sup>7</sup> The most common responses related to peer support and recovery/relapse prevention programming followed by social events, safe space and environment, and counseling/behavioral health support. As a result, one can infer that the most common element of recovery support on college campuses remains as peer support pertaining to recovery/relapse prevention. Many campuses determine a need to offer counseling/behavioral health support or other clinical offers; however, the most common, and often the first steps in starting to support students in recovery are focused on establishing peer support.

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7. <https://www.transformingyouthrecovery.org/research/38-assets-for-building-collegiate-recovery-capacity-revised-2015/>

### Area of focus

87.40% of respondents indicated the area of focus for their services and resources to be peer support, 74.02% indicated social activities and sober fun as the area of focus, 34.65% indicated counseling or clinical support, and 22.05% indicated other. The area of focus is not correlated with the stage of the services and resources. Although this analysis was not completed, researchers hypothesize that area of focus is more likely correlated with the department or group responsible. Among the other areas of focus identified, 10 respondents indicated advocacy, outreach, & education, five respondents indicated community service, and four respondents indicated recovery support & resources and student development (leadership and life skills). The majority of services and resources are centered on peer support, social activities, and sober fun. Therefore, students looking for counseling or clinical support need to either select an institution with that area of focus or know that they need to find those supports outside of their institution.

### Additional practices

The most common program practices identified were: coordinate events to raise awareness on campus (74.02%), organize sober social events for the recovery community and beyond (72.44%), and advocacy efforts undertaken for student needs (70.87%). The least common practices identified were: arrange for access to gyms, sports facilities, or intramural activities (14.17%), connect to job-placement, internship, and career day program (14.17%), offer relapse training to staff and students (12.60%), and mentor high school students in recovery (7.09%). All of the practices offered were selected by one or more respondents indicating that similarities and commonalities do exist among institutions; however, customization is taking place at a local level. In general, early stage services and resources had fewer practices while mid and late stage services and resources had more practices. Among early stage services and resources, there were four practices that over 60% of respondents selected: ((1) advocacy efforts undertaken for student needs, (2) coordinate events to raise awareness on campus, (3) host on-campus 12-step or other mutual aid support groups, (4) organize sober social events for the recovery community and beyond). Among mid stage services and resources there were eight practices that over 60% of respondents selected ((1) advocacy efforts undertaken for student needs, (2) have a registered student organization or club, (3) coordinate events to raise awareness on campus, (4) give presentations on recovery resources in the community, (5) host on-campus 12-step or other mutual aid support groups, (6) offer peer mentoring support, (7) organize sober social events for the recovery community and beyond, and (8) staff and students attend conferences.) Among late stage services and resources there were 16 practices that over 60% of respondents selected ((1) advocacy efforts undertaken for student needs, (2) arrange for seminars, classes, or academic advising for students, (3) coordinate events to raise awareness on campus, (4) facilitate life skills workshops, (5) give presentations on recovery resources in the community, (6) host on-campus 12-step or other mutual aid support groups, (7) keep consistent drop-in hours, (8) offer peer mentoring support, (9) organize sober social events for the recovery community and beyond, (10) promote community service and other volunteer opportunities, (11) provide recovery workshops (e.g. spirituality, meditation, 12-steps for self-compassion), (12) schedule group meetings other than formal/clinical support group meetings, (13) set recurring recovery group events (e.g. sober birthday celebrations, weekly dinners, etc.), (14) staff and students attend conferences, (15) staff-led outings off-campus, and (16) student-led outings off campus.) The increase in practice offerings as services and resources advance through the stages of development should be used to empower those starting efforts; individuals and campuses in early stage efforts should not be overwhelmed, but pick a few practices to begin with and then add practices over time. To get started a college or university does not need to have everything figured out; they just need to get started and work toward adding additional practices that make sense for their community over time.



### Admissions

42.52% of respondents indicated their services and resources had no relationship with admissions, 19.69% indicated they had an informal relationship/no process for interacting with admissions, and 15.75% of respondents indicated that students in recovery typically come to the program prior to applying and then the program helps to guide them through the admissions process. Over 40% of late stage respondents indicated that students come to them prior to applying and then they help to guide students through the admissions process. It is unclear how important a formal relationship with admissions is. A formal relationship may help with student recruitment; however, with only 1.57% of respondents indicating a formalized or regular process it is hard to make an assessment. That said, well-known late stage services and resources seem to need to be prepared to help students navigate the process as reputation is often preceding admissions on these campuses.

### Scholarships

Only 18.11% of respondents indicated their services and resources include scholarships; however, this low number of scholarships offered may be indicative of the recent increase in services and resources as the existence of scholarships is correlated with stage of development. 7.69% of early stage, 21.95% of mid stage, and 52.63% of late stage services and resources offer scholarships. Offering scholarships may be correlated with level of institutionalization although this analysis was not completed. Among institutions offering scholarships, the amount offered and the rationale for award varies. Scholarships range in value from \$100 to over \$3,000.

### Accommodations

The question about accommodations elicited one of the lowest response rates in the entire survey with only 43 of 127 respondents providing a response. Among those who provided a response, the most common accommodation made is medical withdrawals for students to attend treatment (21.26%).

### Student involvement

Among respondents, student involvement remains relatively low. 31.5% of respondents indicated 0-5 undergraduate students are involved, 19.69% of respondents indicated 6-10 undergraduate students are involved, and 14.17% of respondents indicated 11-15 undergraduate students are involved. This means, that among respondents, 65.36% are serving 15 or fewer students. 23.63% of respondents have 16 or more undergraduate students involved. Graduate student involvement is far less with 74.02% of respondents indicating 0-5 graduate students involved. There may be an opportunity to further explore and expand the field by ensuring colleges and universities are offering recovery supports for graduate students and making graduate students aware of the recovery supports that are available. The number of undergraduate students involved is not correlated with the number of years since started. A correlation may be made to the size of the campus or the practices offered among other variables; however, this analysis was not completed.

### Student participation requirements

40.16% of respondents indicated their services and resources are open to any student while 36.22% of respondents indicated that students must be in recovery from a substance use disorder in order to participate. Only 21.05% of late stage services and resources are open to any student while 50% of early stage programs are open to any student. This may be indicative of the fact that when services and resources first get started their intent is to be inclusive and then as time goes on and the services and resources become more formalized, more processes and procedures are put into place. Late stage services and resources require an application to participate at a significantly higher rate (47.37%) than early (13.46%) or mid (14.63%) stage services and resources. The vast majority of respondents (76.38%) do not have minimum abstinence requirements. Among the 11.81% of respondents indicating that they do indeed have minimum abstinence requirements the requirements varied from 2 weeks to 12 months. Five respondents indicated three months of abstinence were

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required to participate; among respondents that offered a description of their abstinence requirements this was the most common response. 22.83% of respondents indicated they had other requirements for participation; the percentage of respondents indicating other requirements increased with stage with 17.31% of early stage respondents indicating other requirements, 46.34% of mid stage respondents indicating other requirements, and 57.89% of late stage respondents indicating other requirements for participation. The most common types of other requirements included attendance/engagement requirements and commitment to remain abstinent requirements.

### Handling relapse

The most common practices for handling relapse/return to use included referral to service (24.74%) and staff mentorship and support (25.77%). 19.59% of respondents indicated that relapse is handled on a case-by-case/individual basis. 12.37% of respondents indicated that there is no plan in place/no plan created yet/plan in development. This was an open-ended question so the lower response percentages are expected as respondents needed to initiate their own response rather than select from pre-determined options; however, researchers recommend that more institutions have plans in place for handling relapse. Having a clear plan in place for handling relapse that can be articulated to students is recommended in order to manage expectations and support students. A clear plan may just be that relapse is handled on a case-by-base basis. Articulating a plan confirms that relapse/return to use is a part of recovery and something that participants should actively be planning for.

### Spaces

40.94% of respondents indicated that the services and resources are offered in a dedicated space, which is only available to participating students, 28.35% of respondents indicated their services and resources are offered in a space that is shared with other groups but is consistently available, 13.39% of respondents indicated that the space the services and resources are offered in varies and is not consistently available, and 4.72% of respondents indicated no space is available. There is no direct correlation between the spaces available and how long the services and resources have existed. However, in general, the longer services and resources have existed, the more likely it is to have a dedicated space. A dedicated space has consistently been ranked as one of the most important assets and it is recommended that institutions continue to pursue the acquisition of dedicated space as it provides students a safe place to gather and meet.



### Longevity of TYR grantees

Since 2013, TYR has committed grants to 164 institutions of higher education. As part of this research, TYR worked to identify which, if any, of its grantees are no longer offering recovery services and resources or offering very limited services and resources. Through our research we have found that only 9 of 164 are no longer offering recovery supports or services or offering very limited recovery supports and services. These institutions include:

School	Reason for no longer offering supports
California State University Stanislaus	Unknown
Louisiana State University at Alexandria	Applied for grant but then declined grant due to institutional barriers. Program never got started
Northern State University	Unknown
North Carolina Central University	No current program but working on starting one
Stony Brook University	Challenges recruiting students. Still advertise program but no students involved
Sweet Briar College	School closed
University of Nevada Las Vegas	Unknown
University of North Carolina Pembroke	Unknown
Villanova University	Applied for grant but then declined grant due to student graduation

Table 25. Longevity of TYR grantees.

# RECOMMENDATIONS

1. The field adopt an expanded definitional framework to better describe the recovery services and resources being offered at institutions of higher education.
2. Researchers and practitioners should use the census data to more accurately describe the field, garner additional funding and support, and conduct additional research.
3. The field continue to conduct regular censuses to ensure accurate representations are made of services and resources offered by institutions of higher education expand and endure.

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# APPENDIX

## Appendix I – Raw data for department or group responsible for services and resources

TYR codification	Which department or group is responsible for your program? (Raw data)
Alcohol and Other Drug Program/Services	Center for the Application of Substance Abuse Technologies (CASAT)
	Health Services-Substance Abuse Education Office
	Student Health Alcohol & Drug Program
	CADEC2
	Alcohol and Drug Education
	Campus Alcohol and Drug Education Center (CADEC)
	UNM Campus Office of Substance Abuse Prevention- COSAP
	Center for Drug Abuse Research
	Substance Abuse Program
	Community, Family and Addiction Sciences
Campus Recreation	Campus Recreation and Wellness
Counseling and Psychological Services	CAPS
	ADAP or CAPS
	Counseling Services
	Personal Counseling
	The University Counseling and Testing Center
	Counseling & Psychological Services
	Counseling and Psychological Services
	Counseling Center
	Counseling Center
	Counseling Services
	Missouri State University Counseling Center
	Student Counseling Center
	Center for Counseling and Student Development
	Counseling
	Counseling and Psychological Services (CAPS)
	Counseling, Health, Disability
	Counseling Center
	CAPS
	Counseling ADAP, and psychiatric services
	Pratt Counseling Department
Dean's Office	University Counseling Service & Wellness Services
	Rutgers CAPS
	Dean of the College Office
	Dean of Students Office



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TYR codification	Which department or group is responsible for your program? (Raw data)
	The Office of the Dean of Students
	Dean of Students
	Office of the Dean of Student Life
Department of Social Work/Human Services	Counselor Education
	College of Social Work
	Graduate Social Work
	Human Services Program
	Human Services/alcohol and Other Drug Studies
Enrollment Services	Enrollment services
	Enrollment services
Health & Wellness Services	Student Health- Office of Health Promotion
	Student Wellness & Health Promotion
	Campus Involvement Center/Health Promotion
	Center for Wellness Promotion
	Health and Counseling
	Health and Counseling
	Student health and counseling services
	Wolverine Wellness
	Health Promotion
	Student Health Services
	Student Health Services, Wellness & Prevention
	The Fontaine Center within Health Promotion Department
	The Office of Health Advancement
	The Wellness Resource Center
	Wellness and Counseling and Testing
	Wellness Resource Center
	Office of Health and Wellness Promotion
	Office of Health Promotion
	SHOP
	Student Wellness & Health Promotion
	Wellness Center
	Wellness Center
	Health Promotion & Education
	Hokie Wellness
	Student Wellness Resource Center
	University Health Center and Terps for Recovery student org
	University Health Services
	Wellness Department
	Wellness Promotion



## 2017 Census and Definitions for Recovery Support in Higher Education

TYR codification	Which department or group is responsible for your program? (Raw data)
	Health and Counseling Center
	Health Promotion and Prevention
	Student Health Services
	University Health and Counseling
	Wellness & Prevention Services, Student Health Services
	Health Promotion
	Student health center
	Wellness Center
	Wellness Center
	Wellness Services-Counseling
	Wellness/Student affairs
	LiveWell: Office of Health Education, Promotion, & Wellness
	Owls Care Health Promotion & Collegiate Recovery Community (student group)
Student Affairs	Student Life
	Student Affairs
	Division of Student Affairs
	Student Affairs
	Division of Student Affairs; Education and Outreach Office
	Student Development
	Student Affairs
	Student Life & Development
	Division of Student Affairs and Enrollment Services
	Student Life
	Student Services
	Division of Student Affairs
	Indiana University Student Affairs
	Student Support and Advocacy Center
	Student Support and Wellness Promotion
	Student Affairs
	Student Outreach and Support
	Division of Student Affairs
	Student Affairs SAVES office
	Student Affairs
	Student Services
Student Organization	Live Free Student Group
	Student group that partners with DuWell
	Council of Student Organizations
	Which department or group is responsible for your program?

## 2017 Census and Definitions for Recovery Support in Higher Education

### Appendix II – Raw data for handling relapse

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
Abstinence is not a requirement of the program although being supportive of the milieu is. If a student is showing up to the program intoxicated staff will speak with the student about the affect their actions have and how they desire to handle it.	Staff mentorship and support		
All students know that after a relapse the most important thing is to come back and reconnect no matter what. When a student relapses there is a system of staff and peers that offer accountability to the student and leave the door open for the student to turn back to the recovery community without judgment. The student is encouraged to meet individually with the CSR program manager and center counselor for recovery planning and review of relapse prevention plan. Depending on the situation a referral may be made. Each relapse is different and our hope is that the student makes it back through our support and intentional recovery planning and relapse prevention.	Assessment and development of recovery/ relapse protection plan	Referral to services	
Any member who relapses is encouraged to continue engaging with the program as long as he/she is still considering recovery and is not disruptive or detrimental to others in the group. A dedicated staff member would meet one-on-one with the student to check-in and provide encouragement and resource information.	Re-engage-ment in program	Staff mentorship and support	
As the advisor I meet individually with a student who relapses and we discuss what she/he will do to get back on track with recovery. I will meet as many times as needed. We may also make referrals to the counseling department here or to resources in the community as needed.	Staff mentorship and support	Referral to services	
As we don't have formal membership rules, we don't have a formal response to relapse. If someone who has Level 2 or 3 access relapses, they no longer have that access, but they are encouraged to continue to participate in programming if they have a desire to be sober/in recovery. Typically the community rallies around that person and tries to bring them back into the group as quickly as possible.	No plan in place/no plan created yet/plan in development	Peer mentorship and support	
Because there is not a firm criteria for sobriety to attend our group or access our services, students who report relapse are still welcome to attend. Individual discussions with staff person are had when necessary if a student chronically relapses or is actively using, to assess a higher level of care.	Staff mentorship and support		
Case by Case	Case-by-case/ individual basis		
Case by case	Case-by-case/ individual basis		
Case by case basis. Depends on what the student needs, wants, and is willing to do.	Case-by-case/ individual basis		
Case management, referrals to care, support from CRP	Assessment and development of recovery/ relapse protection plan	Referral to services	Peer mentorship and support
Case-by-case basis. Student is encouraged to increase counseling and meeting attendance. Treatment is recommended if necessary.	Case-by-case/ individual basis	Re-engage-ment in program	Referral to services

## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
Currently don't have any students so we don't have a strategy to handle relapse.	No plan in place/no plan created yet/plan in development		
Discuss and process with student, assess level of care needs and other support needs.	Staff mentorship and support		
Every student's recovery trajectory is individual- when students relapse, staff consistently reach out to offer support and see if any higher levels of intervention are needed. Ultimately, we do not force participation but always keep our doors open. Students who relapse over a short period of time and immediately return to the community do not have previously granted privileges (swipe access to space) removed if staff find the student to continually be trustworthy. The goal is always to increase support.	Staff mentorship and support		
Everything is a case by case basis so we work with the student and see what their needs are and go from there. There is no set standard. This might change when we move to recovery housing but for now, we do not have any policies in place that we must stick to for relapses.	Case-by-case/ individual basis		
I am not a facilitator for meetings, therefore I do not know how it is dealt with. However I am sure our facilitators are kind, compassionate, understanding, and supportive.	Other		
If a student relapses, the staff has a conversation with the student and asks if they are interested in recommitting to their recovery. If the student is, they sign and adhere to a 90 day recovery protection plan which includes 90 meetings in 90 days, an assessment with the counseling center on campus, weekly individual check-ins with staff, attendance to all community check-ins, and attendance to three on campus 12 step meetings. If a student decides they are not willing to recommit to their recovery, then they are not invited back into the community, but are told that they are always welcome back if they are willing to recommit to their recovery.	Staff mentorship and support	Assessment and development of recovery/ relapse protection plan	Counseling
If a student were to relapse, we would recommend an assessment by a counselor and provide a referral to whatever level of care would be needed. Our recovery support is always open, however. The student would be in charge of taking recommendations.	Assessment and referral to services		
If students relapse, the Director of the program attempts to stay in touch with them and meet with them individually. When and if that student makes a commitment to be abstinent, they can return to recovery meetings.	Staff mentorship and support		
If the member regains sobriety they are welcomed back to the group.	Other		
If the student demonstrates a willingness to remain substance free, we will accept them back into our community as long as all students feel safe.	Other		
In our early stages of experience, the students who have experienced a relapse have been severe enough to require the student to re-enter treatment. Staff has assisted with the withdraw process in order for the student to attend treatment mid-semester.	Staff mentorship and support		

## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
In the event of a relapse, the resident will need to move out of the Recovery Community immediately. Should this occur, support will be provided to the individual in the development of a new treatment plan with the hope that the student will be allowed to return to the Recovery Community upon 6 months of renewed abstinence. If the student remains enrolled, she/he will be bound to the terms of the housing agreement and will be reassigned to another university operated space as deemed appropriate by the Department of Residential Life. Students may still participate in the if they return to abstinence.	Staff mentorship and support	Assessment and development of recovery/ relapse protection plan	
In the Recovery House relapses are handled case by case. For students in recovery who do not live in the Recovery House encourage a variety of options.	Case-by-case/ individual basis		
Individual basis, will make a referral if needed	Case-by-case/ individual basis	Referral to services	
Individual must follow treatment recommendations	Assessment and development of recovery/ relapse protection plan		
It depends, most get kicked out, but they will work with some to help them stay sober if they choose to accept	Student suspended from program	Staff mentorship and support	
It is individual to the student and their needs/the situation, but we always work to get them the help they need (i.e. counseling, detox, treatment)	Case-by-case/ individual basis		
It's new so at this point, we haven't had that happen	No plan in place/no plan created yet/plan in development		
Let them know its only temporary and get them back on track	Re-engage-ment in program		
Meet with student to assess stage of change ability and motivation to sustain recovery. Referral to higher level of care on and off campus, on campus assessment.	Assessment and referral to services		
Meeting with coordinator and determining a relapse prevention plan. That could include treatment, extra support groups, therapy, change in medication, ext. It is a case by case basis.	Assessment and development of recovery/relapse protection plan	Case-by-case/ individual basis	
Much like 12-step programs, we offer mentorship and mutual peer support through meetings and social programs. Members who relapse (there have been none so far) are responsible for pursuing sobriety by attending group functions, and the group provides peer mentorship and emotional/social support.	Staff mentorship and support	Peer mentorship and support	
Non-judgmentally and in a supportive, resource finding way.	Other		

## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
Not this far along yet	No plan in place/no plan created yet/plan in development		
On a case by case basis.	Case-by-case/ individual basis		
On a case-by-case basis, we offer consultation to determine what resources are necessary in order for the student to find success, whether they remain enrolled or withdraw to attend treatment	Case-by-case/ individual basis	Assessment and referral to services	
On an individual basis	Case-by-case/ individual basis		
Our long term goal is abstinence. However, we want students to start where they are today.	Other		
Our program has not had the opportunity to deal with relapse as of yet but are in conversation about how we will support students as an institution as well as within the student group if there are continued issues with substances.	No plan in place/no plan created yet/plan in development		
Peer support, counselling, referrals to treatment centers	Peer mentorship and support	Assessment and referral to services	
Reengage students as quickly as possible	Re-engage- ment in program		
Refers to counseling services.	Referral to services		
Relapse is addressed on a one-on-one basis. Students are not permitted to attend meetings while under the influence. A student who relapses meets with the program coordinator and advisor to work on a plan to become drug and alcohol free again.	Case-by-case/ individual basis	Assessment and develop- ment of recov- ery/relapse protection plan	
Relapse is handled by meeting with program advisor and working on understanding cause of relapse, what learned, and moving forward	Staff mentorship and support		
Relapse is handled on a case by case basis. Generally, a student would be referred to counseling or a treatment program.	Case-by-case/ individual basis	Referral to services	
Relapse is not considered a "failure" but a potential opportunity to learn how to better prevent future relapses. For serious, ongoing relapses, we may refer to higher level of care off campus	Referral to services		
Relapses are handled on a case-by-case basis and typically involve close collaboration with our clinical partners at the Alcohol and Other Drug Program at the Counseling and Mental Health Center. Because students are welcome to participate at CSR no matter where they are in their recovery journey, students experiencing a return to use are encouraged to keep coming back if they are seeking recovery support.	Case-by-case/ individual basis	Re-engage- ment in program	



## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
Relapses are handled on a case-by-case basis. Students are connected to campus and community resources and are treated in a non-judgmental manner as to allow the student to continue the program, if appropriate.	Case-by-case/ individual basis	Referral to services	
Situationally dependent. If the student acknowledges use as a relapse and has the desire to recovery, we ask student to identify their path to the relapse, to reinvigorate their recovery protection plan, and to ask the community for support moving forward. If the student is questioning their SUD status, student is encouraged to do the work of figuring out whether recovery is right for them. The door is always open to return, or to have conversation exploring this part of their identity.	Assessment and development of recovery/ relapse protection plan	Staff mentorship and support	
Student is screened by program. If further assistance is needed, student is referred to one of the 72 area treatment facilities. We have a working relation with Philadelphia's Department of Behavioral Health and Intellectual disabilities Services.	Assessment and referral to services		
Students are assessed to determine the appropriate level of care based on impact on functioning. Students are supported to access whatever level of care is needed. Students are encouraged by staff and peers as they navigate challenges in order to find success.	Assessment and referral to services	Staff mentorship and support	Peer mentorship and support
Students are re-evaluated and placed in treatment. Medical leave is provided.	Assessment and referral to services		
Students are typically seen by the campus AOD specialist, who works to assist with further evaluation and placement.	Assessment and referral to services		
Support and possible referral for clinical services.	Staff mentorship and support	Referral to services	
Support and treatment	Staff mentorship and support	Referral to services	
Supported by campus counseling center and community providers	Staff mentorship and support	Referral to services	Counseling
The individual who relapses meets with a SSAC staff member.	Staff mentorship and support		
The RA's handle the initial steps of a relapse which is identifying when someone has relapsed. If someone needs medical attention, they get it. The advisor of the program is notified immediately no matter what the time of day is, and the situation is handled immediately. Parents are generally notified given the relationship the student has with them. IOP/Rehab/PHP is required for students to come back to the house after a relapse.	Referral to services	Student suspended from program	
The student is suspended and not permitted to attend weekly meetings or activities. He/she is assessed and assisted to access treatment.	Student suspended from program	Referral to services	

## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
The Collegiate Recovery Community strives to meet students where they are at. Therefore, each return to use incident is dealt with on a case by case basis depending on the student's situation.	Case-by-case/ individual basis		
They are encouraged to stay involved.	Re-engage-ment in program		
They are offered referral services to individual counseling, community services, and higher levels of care in residential treatment. They can come to group if they are actively pursuing their recovery program. If they are currently in a relapse, we ask that they be sober if they want to attend any of the sober functions.	Referral to services		
To be determined, policy under development as this is our 1st semester of operations.	No plan in place/no plan created yet/plan in development		
Usually students remove themselves from the community when they relapse; we have yet to have students relapse together, for instance (at least to the best of our knowledge). As we do not restrict access to recovery events to people who are already 100% abstinent and committed to remain so, a relapse also would not result in their exclusion from the community. Usually community members are understanding when they find out, and encourage the student to return to using the supports available.	Peer mentorship and support		
We are a supportive community that offers peer support and outreach services. We can refer students to credible resources who are beyond our scope of practice. It is our goal to keep everyone safe and moving towards a substance free lifestyle.	Peer mentorship and support	Referral to services	
We are in the beginning stages and haven't developed this yet.	No plan in place/no plan created yet/ plan in development		
We are new, but I would anticipate we would connect to the appropriate level of care resources that are available in our area and offer resources.	Referral to services		
We believe in providing students who have relapsed additional support and attention and making an effort to make sure they are with other students in recovery who have significant sober time.	Staff mentorship and support		
We dedicate one meeting per month to relapse. The assistant director also works individually with each student and has them complete a relapse protection plan. If a student relapses and shares it, then the peer support group helps the student process it along with the assistant director.	Assessment and development of recovery/relapse protection plan	Peer mentorship and support	
We do not have a protocol in place to deal with relapses.	No plan in place/no plan created yet/plan in development		



## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
We do not have any protocol for that.	No plan in place/no plan created yet/plan in development		
We get past it and help them get back on track.	Re-engage-ment in program		
We handle it on a case-by-case basis, but generally, the student would meet one-on-one with the LCDC to determine the best course of action. This could mean a referral to treatment, getting a sponsor, attending more meetings etc. The student would not lose any privileges at the Recovery Center as a result of a relapse.	Case-by-case/individual basis	Assessment and referral to services	
We have a house meeting and offer support and inpatient treatment if needed.	Staff mentorship and support	Peer mentorship and support	Referral to services
We have no minimum sobriety time requirement for participation with the group, and encourage students to stay in touch with the program and reach out for help if they want to get connected to other services on campus or in the area.	Referral to services		
We have not experienced this yet, but also do not have a plan in place.	No plan in place/no plan created yet/plan in development		
We have only had two meetings so far and this has not happened yet. I think if it does its important to be aware of the limitations a peer- support group can provide- we can lend a listening ear, and friendship but we also have outside sources available if necessary.	Peer mentorship and support	Referral to services	
We have therapists and a treatment program as well as private treatment and sober living options in Morgantown.	Referral to services		
We haven't decided yet.	No plan in place/no plan created yet/plan in development		
We need to address this as we formalize our program. We are in the beginning planning phase.	No plan in place/no plan created yet/plan in development		
We recognize that relapse is a component of the recovery process for certain individuals (per the Stages of Change model) and will assist those students who request our help in getting back on track.	Staff mentorship and support		

## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
We suggest that the student talk to the advisor of the group and come up with a plan for treatment if needed and work with the student. We believe that separating the student from the group is not health and will only further compromise that person's recovery. We also need to protect the recovery of the rest of the group.	Assessment and development of recovery/relapse protection plan		
We support students in whatever stage of recovery they are in.	Other		
We understand that every person is in a different place and our focus is on providing support, whether a student has been clean for years or has recently had a relapse.	Staff mentorship and support		
We understand that relapse is a part of the recovery process and do not stigmatize nor isolate those students who suffer a relapse.	Other		
We welcome any and all into our program. If you show up, you want to be here. There are no attendance requirements.	Other		
We welcome the student back with open arms.	Re-engagement in program		
We will continue to support student, as long as the student is committed to recovery. Each case is evaluated on a case by case basis.	Case-by-case/individual basis	Staff mentorship and support	
We will meet the student where he/she/zir is at, and we will welcome them with our open arms. Relapses are a very vulnerable and emotion-filled time, and it is very important for our program to be there for the individual when this happens, so we reach out to the individual when this happens. Putting a punishment to it would not help the individual, but if he/she/zir is part of the student org as a board member, then we will ask him/her/zir to step down for a little 'til they can get to being sober for at least 3 months again. If he/she/zir is a student member (but not a board member), we will make sure to reach out and make sure they know of the supports within the community that will help them get back onto their path of recovery.	Other		
We work with students on their recovery efforts. We support and connect student with appropriate resources when needed. We offer personal counseling for students in recovery.	Staff mentorship and support	Referral to services	Counseling
We work with the students to help them develop a new recovery plan and provide additional individualized support.	Assessment and development of recovery/relapse protection plan		
We work with them individually to provide clinical interventions and referrals off campus if needed.	Counseling	Referral to services	
Whatever is needed.	Other		

## 2017 Census and Definitions for Recovery Support in Higher Education

Please describe how your program handles relapse.	TYR Codification	TYR Codification	TYR Codification
When a student has experienced a return to use, the CRP response is varied depending on the unique student's circumstances, level of relapse and willingness/ability to reengage with a recovery lifestyle. We may work with the family to increase their support systems, or assist them with a medical withdrawal for a period of time if appropriate.	Referral to services		
With love, compassion and support	Other		
Work with the student around the stressors before and during the relapse. What the relapse looked like, and create a Wellness Recovery Action Plan.	Assessment and development of recovery/relapse protection plan		

### Appendix III – Informational and programmatic materials used to draft preliminary definitions

Institution or Organization	Retrieved from	Key Definitional Phrases
Association of Recovery in Higher Education	<a href="https://collegiaterecovery.org/faq/">https://collegiaterecovery.org/faq/</a>  <a href="https://collegiaterecovery.org/standards-and-recommendations/">https://collegiaterecovery.org/standards-and-recommendations/</a>	<p>A. Collegiate Recovery Programs (CRPs) and Collegiate Recovery Communities (CRCs) are terms that are often used interchangeably to describe an institutionally sanctioned and supported program for students in recovery from addiction seeking a degree in higher education. The goal of a CRP or CRC is generally to offer the chance for students in recovery from addiction to experience the opportunities that higher education offers both in the college environment, and after by providing support, preventing a return to use, and promoting academic performance. Research informs us that the most essential elements to a successful CRP/CRC are:</p> <ul style="list-style-type: none"> <li>• University- dedicated staff person</li> <li>• A physical dedicated space on University campus</li> <li>• Embrace abstinence-based recovery</li> <li>• Housed within Institutions of Higher Education that confers academic degrees</li> <li>• Program provides recovery protection services and recovery capital resources</li> <li>• Program must include a community of students who offer each other peer support</li> <li>• Non-profit entities</li> <li>• However, as this is a relatively new field and programs are starting all the time, individual CRPs may likely vary on key dimensions.</li> </ul> <p>While the terms CRP and CRC are often used interchangeably, some programs use them in slightly different manners. There may be differences in the level and involvement of the university and the roles played by the staff, they may refer to one as the program and the other as the actual community of students within the program. When inquiring about a program at a specific institution, be sure to clarify what they mean when they use a specific term.</p>
Augsburg University	<a href="http://www.augsburg.edu/stepup/parents/collegiate-recovery-programs-wor/">http://www.augsburg.edu/stepup/parents/collegiate-recovery-programs-wor/</a>	<p>What makes a program a Collegiate Recovery Program (CRP)? These programs are more than a “dry” or “sober” residence hall. Colleges and universities designate first and second-year student residence halls as “alcohol-free” but unfortunately, this designation and the reality can be quite different things. A CRP is much more than simply an “alcohol-free” space. A CRP is a program which offers specialized and strategic support to help students achieve growth and success in their recovery and academic journey.</p>

## 2017 Census and Definitions for Recovery Support in Higher Education

Institution or Organization	Retrieved from	Key Definitional Phrases
<b>Hazelden Betty Ford</b>	<a href="http://www.hazelden-bettyford.org/articles/greenagel/history-of-collegiate-recovery-programs">http://www.hazelden-bettyford.org/articles/greenagel/history-of-collegiate-recovery-programs</a>	<p>Each school has to deal with its own structure, bureaucracy, and internal politics. Some programs fall under the auspice of the counseling center, while others are run through the counseling center, and still others are overseen by a wellness center or student affairs. The following are aspects of Collegiate Recovery Programs (their presence and intensity vary from campus to campus):</p> <ul style="list-style-type: none"> <li>• On-campus and off-campus meetings - Many programs have on-campus meetings, while all of them have meetings that are available off-campus. Over the years, many students have reported feeling less of a stigma and more accepted when there are other students near their age at Twelve Step meetings.</li> <li>• Space on campus - Texas Tech set the standard for providing a space on campus for students to meet, relax, and engage in activities. This space is the primary focus of a large number of collegiate recovery programs.</li> <li>• Academic supports - Some schools provide specific academic advising and tutoring for their recovery students.</li> <li>• Individual counseling - Almost all of these programs have individual counseling. The frequency varies.</li> <li>• Group counseling - Again, the number and frequency of groups vary from campus to campus. Rutgers has had an ongoing early recovery group since 1984.</li> <li>• Activities - Rutgers, Augsburg and Texas Tech all found that offering activities greatly helped build the recovery community and reduce relapse rates. The more successful programs have funding for activities and professional staff that organize them.</li> <li>• Outreach work - This was Augsburg's forte since their beginning. Other schools have followed their lead on community service and speaking to high school students and in treatment programs.</li> <li>• Alumni contacts - Very few college programs are older than 10 years, and as a result, there are not many alumni of recovery programs. People in recovery that graduated from a university are a great resource for current recovery students, and schools that have reached out to those alumni and gotten them to attend activities and support current students have found those alumni to be invaluable.</li> </ul>
<b>Laudet et al., Collegiate Recovery Communities Programs: What do we know and what do we need to know? (2014)</b>	<a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3952555/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3952555/</a>	<p>CRPs' goal is to allow recovering students to extend their participation in a continuing care program without having to postpone or surrender achieving their educational goals. Thus CRPs strive to create a campus-based "recovery friendly" space and supportive social community to enhance educational opportunities while supporting continued students' recovery and emotional growth (Harris et al., 2008; White, 2001). As described in a handful of reports, these programs fit the paradigm of continuing care within a "recovery management" system that experts recommend (Godley et al., 2002). The model is also consistent with calls for appropriate campus-based infrastructure to support recovering students (Misch, 2009), with recent shifts in drug policy (ONDCP, 2010), and with the US Department of Education's goal of ensuring a continuum of care from high school to college to post-graduation (Dickard et al., 2011).</p>
<b>Life of Purpose</b>	<a href="https://www.lifeofpurpose.treatment.com/about/collegiate-recovery/">https://www.lifeofpurpose.treatment.com/about/collegiate-recovery/</a>	<p>Collegiate Recovery Programs (CRP's) strive to create a campus-based, "recovery-friendly" space and a supportive social community to enhance educational opportunities while supporting continued recovery and emotional growth.</p> <p>The primary goal of a CRP is to afford students in recovery a normative collegiate experience through the creation, implementation, and maintenance of peer-to-peer support services on campus. On-campus support structures range from student organizations to the implementation of programs on campus with dedicated housing, space, and staff.</p>

## 2017 Census and Definitions for Recovery Support in Higher Education

Institution or Organization	Retrieved from	Key Definitional Phrases
Recovery Research Institute	<a href="https://www.recoveryanswers.org/research-post/collegiate-recovery-programs-recovery-support-for-college-students/">https://www.recoveryanswers.org/research-post/collegiate-recovery-programs-recovery-support-for-college-students/</a>	Collegiate recovery programs (CRP) are a form of support service created to meet the needs of college students in recovery. While services may vary by location, most CRPs offer onsite sober housing, mutual-help meetings (e.g., Alcoholics Anonymous), individual counseling, sober events, and seminars on relevant topics.
Rutgers University, ADAP Recovery Housing	<a href="http://rhscaps.rutgers.edu/services/adap-recovery-housing/">http://rhscaps.rutgers.edu/services/adap-recovery-housing/</a>	<p>Students support each other's sobriety while forming meaningful personal relationships based around friendship, sobriety and their college experiences. Some of the unique benefits to Recovery Housing are:</p> <ul style="list-style-type: none"> <li>• The Recovery House is an on-campus residence hall.</li> <li>• There are no signs, which protects students' anonymity.</li> <li>• A 12-month housing option.</li> <li>• Easy access to University resources such as Rutgers Health Services, which includes Counseling, Alcohol &amp; Other Drug Assistance Program &amp; Psychiatric Services (CAPS), medical services, on campus 12-Step meetings and recovery counseling.</li> <li>• There is a Recovery Counselor (RC) who advises students on academic and career support.</li> <li>• Organized activities such as attendance at sporting events and plays, hikes, bike trips, intramurals and other campus events.</li> </ul>
The Center for Collegiate Recovery Communities at Texas Tech University	<a href="http://www.depts.ttu.edu/hs/csa/support.php">http://www.depts.ttu.edu/hs/csa/support.php</a>	<p>The CRC offers support in each of the four principles that lay the foundation for student growth and progress in recovery.</p> <ul style="list-style-type: none"> <li>• Clean, Sober, and Healthy</li> <li>• Commitment to Academics</li> <li>• Connected in Community</li> <li>• Civility in Relationships</li> </ul>
The Center for Student in Recovery, The University of Texas at Austin	<a href="https://recovery.utexas.edu/what.html">https://recovery.utexas.edu/what.html</a>	<p>The Center for Students in Recovery (CSR) provides a safe space and supportive community for students in recovery or seeking recovery from addiction. Participation at CSR is completely voluntary and there is no barrier to entry. Students at any stage of recovery and at any point in their academic journeys are welcome. Come hang out at CSR during our open hours, come to a support group meeting, attend a sober social event or just get in the loop about volunteer opportunities and upcoming activities. Recovery works and can be part of a genuine college experience.</p> <p>CSR has four main ingredients that make it a special place:</p> <ul style="list-style-type: none"> <li>• A community of students in recovery from addiction</li> <li>• Recovery-supportive programming</li> <li>• A dedicated space</li> <li>• Committed people</li> </ul>

## 2017 Census and Definitions for Recovery Support in Higher Education

Institution or Organization	Retrieved from	Key Definitional Phrases
<b>The Haven at College, Outpatient Centers</b>	<a href="http://www.thehavenatcollege.com/outpatient-centers/">http://www.thehavenatcollege.com/outpatient-centers/</a>	Outpatient Centers offers a variety of evidence-based treatment services specifically geared to the clinical needs of young adult college students with substance use issues and co-occurring disorders. Our levels of care are delivered by licensed clinicians with deep experience working in addiction treatment.
<b>The Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery, The Ohio State University</b>	<a href="http://hecaod.osu.edu/campus-professionals/recovery-2/start-a-campus-recovery-program/">http://hecaod.osu.edu/campus-professionals/recovery-2/start-a-campus-recovery-program/</a>	<p>There are many ways to support your students who are in, or seeking, recovery. A great place to start is to conduct a focus group with students who are in recovery to learn what they need and how the school can better support them. Identify your recovery champions on campus by convening a group of stakeholders and begin to form partnerships and strategize on how best to support these students.</p> <p>Creating a student organization is a viable means of beginning the process to establishing a formal Collegiate Recovery Program (CRP). A recovery focused student organization can be an easy solution to begin mobilizing students in recovery and identifying their needs. By identifying students in recovery that are ready and willing to spearhead the creation of a registered student organization, a recovery community will form and become the foundation of a CRP.</p>



### Appendix IV - Complete definitional framework for school-based recovery support services and resources in secondary and higher education

School-Based Recovery Support Services and Resources	
This definitional framework is intended to assist families, professionals, researchers, and policymakers with understanding the differences between educational choices for students in recovery from substance use or co-occurring disorders. The framework is organized by educational level with a summary definition of those support program and service known to be available to students in recovery.	
Recovery Support in Higher Education	
<b>Collegiate Recovery</b>	Programs and services designed specifically for students recovering from substance misuse or dependency at institutions of higher education.
<b>Collegiate Recovery Community (CRC)</b>	Efforts by a group of students, supporters, and allies to create safe, supportive learning environments at an institution of higher education for students in recovery from substance misuse or dependency. The primary components of collegiate recovery communities are: <ul style="list-style-type: none"> <li>• Mutual aid support groups near or on campus for students in recovery;</li> <li>• Peer recovery support in a community setting; and,</li> <li>• Sober activities and sharing a common goal of lifelong sobriety.</li> </ul>
<b>Collegiate Recovery Program (CRP)</b>	Programs offered by institutions of higher education that provide safe, supportive, and structured learning environments for enrolled students in recovery from substance misuse or dependency. The primary components of collegiate recovery programs are: <ul style="list-style-type: none"> <li>• Mutual aid support groups near or on campus for students in recovery;</li> <li>• Physical space for students to gather together socially, participate in sober activities, and experience peer recovery support in a safe environment;</li> <li>• Institutional acceptance of and authority over the program and the academic goals of students in recovery;</li> <li>• Staff, counselors, or student leaders who are dedicated to the program; and,</li> <li>• Peers, recovery coaches, or counselors who are available for recovery support.</li> </ul>
<b>Collegiate Recovery Program Residence (CRPR)</b>	A collegiate recovery program that provides an alcohol and drug-free living residence for students in recovery enrolled at an institution of higher education. The residence is a part of the institution's housing authority.
<b>Recovery Support Referral</b>	Colleges and universities that offer some level of substance misuse prevention services and referral-based recovery support resources for enrolled students. These services and resources may include: <ul style="list-style-type: none"> <li>• Alcohol &amp; Other Drug Prevention (AOD) Programs, which offer screening and interventions for substance misuse;</li> <li>• Counseling and Psychological Services (CAPS), which offer clinical services for behavioral and mental health;</li> <li>• Student Health and Wellness Centers, which provide referral services for mutual aid support groups and general wellness classes;</li> <li>• Resource sites, which provide listings of recovery support group meetings and services on or near campus; and,</li> <li>• Assistance with placement in substance-free housing on or near campus.</li> </ul>



## 2017 Census and Definitions for Recovery Support in Higher Education

<b>Outpatient Care and Education Program</b>	<p>Individualized outpatient offerings or part-time Intensive Outpatient Program (IOP) for students enrolled at an institution of higher education. Outpatient clinical care for young adults typically offers flexible day and evening programs so that students can manage treatment services with on-campus class schedules. The primary components are:</p> <ul style="list-style-type: none"> <li>• Individual and group therapy sessions;</li> <li>• Life and study skills development and workshops;</li> <li>• Relapse prevention, health and wellness classes;</li> <li>• Case management and peer mentoring; and,</li> <li>• Drug testing.</li> </ul>
<b>Transitional/Recovery Residence and Education Program</b>	<p>An alcohol- and drug-free living facility for individuals recovering from substance misuse or dependency that often serves as an interim living environment between detoxification experiences or residential treatment and mainstream society. Residences are student-oriented, not affiliated with an institution of higher education, and offer an environment of peer support with other students continuing their education online or at a nearby college campus.</p>
<b>Treatment and Education Program</b>	<p>Residential or day-treatment program in which individuals are admitted for 10 days or more and can enroll and attend classes through a participating college or university (online, at the treatment center, or on-campus). Medication management and medical monitoring is generally available on-site. Facilities address serious psychological and behavior issues and most are state licensed or nationally accredited.</p>
<b>Recovery Support in Secondary Education</b>	
<b>Alternative Peer Group Program</b>	<p>Alternative Peer Groups (APGs) are after-school programs designed specifically for students recovering from substance misuse or dependency. APGs typically combine peer recovery support with clinical practices and place an emphasis on education, accountability, and family support. They are led by a certified counselor who sets standards for the group, which differentiates APGs from general support groups.</p>
<b>Recovery High School</b>	<p>Secondary schools designed specifically for students recovering from substance misuse or dependency.</p>
<b>Recovery Support, Non-Traditional School of Choice</b>	<p>A variety of non-traditional public and private educational options exist and schools of choice with targeted substance misuse programming have an explicit substance misuse prevention/recovery support programs/curricula. The modalities most likely to include a therapeutic component are:</p> <ul style="list-style-type: none"> <li>• <i>Alternative schools</i> – Traditionally set up for disciplinary purposes, most blend a variety of student populations and are time-limited rather than open-ended.</li> <li>• <i>Charter schools</i> – Schools that are granted a charter by the state or local district that exempts them from certain rules and regulations (such as teacher credentials or facility requirements).</li> <li>• <i>Contract schools</i> – States or districts “contract” with an organization or private group to provide education and/or therapeutic services.</li> <li>• <i>Home schools</i> – Students receive academic instruction at home. Some families choose to form “cooperatives” with other home-school families to pool services, often under the umbrella of an independent school.</li> <li>• <i>Virtual/Online schools</i> – Academic coursework, usually accredited through regional accrediting bodies, available through the Internet.</li> <li>• <i>Area Learning Centers</i> – Also known as “Alternative Education Programs”, Area Learning Centers (ALCs) offer individualized programs focusing on academics and workforce preparation, rather than traditional disciplinary alternatives.</li> </ul>

## 2017 Census and Definitions for Recovery Support in Higher Education

<b>Recovery Support, Traditional Secondary School</b>	<p>Public or independent schools providing academic curriculum, most commonly in grades 9-12, leading to a regular education diploma. Most traditional schools offer some level of substance misuse programming, including:</p> <ul style="list-style-type: none"> <li>• General, targeted and indicated prevention;</li> <li>• Early identification and intervention for substance abuse;</li> <li>• Low-intensity, brief intervention/treatment for substance use and co-occurring disorders; and/or</li> <li>• Recovery support referral and/or group counseling for students in recovery.</li> </ul>
<b>Therapeutic Boarding School</b>	<p>Schools and programs offering a curriculum integrating physical, emotional, behavioral, familial, social, intellectual and academic development. Includes outdoor behavioral health and wilderness programs with enrollment that typically ranges from 1 to 2 years.</p>
<b>Treatment Center School</b>	<p>Residential or day-treatment programs in which minors are admitted for 10 days or more and often provide a certain level of schooling for their patients. Medication management and medical monitoring is generally available on-site. Facilities treat adolescents with serious psychological and behavior issues and most are state licensed or nationally accredited. Services are highly structured.</p>

### Appendix V – How services and resources help students stay alcohol and drug free

How services and resources help students stay alcohol and drug free
We provide ongoing recovery support services through clinical support, peer support, and by cultivating a sober social environment. Additionally, we work to raise awareness around campus to decrease stigma and make services accessible.
Through social connection and academic supports.
We help students connect with each other and develop community. We also provide support groups to help them develop the skills needed to navigate college.
Our recovery supports provide safe spaces in which students can connect with others also trying to get or remain sober/in recovery on campus.
Peer support is really the strength of our small program, but we hope to eventually provide sober housing, a drop-in center, and more scheduled off-campus fun events.
Provide substance free socialization opportunities
University Counseling Service and Student Health & Wellness are collaborating with a new support group called Success, Not Excess. This group is designed to provide a safe and supportive space for students who are wanting to make or are considering changes in alcohol or other drug use. The group emphasizes success in academics, relationships, mental and physical health, and other meaningful goals through abstaining or reducing alcohol and other drug use. The group operates from a “no pressure” approach by encouraging the discussion of shared experiences and achieving success in college by removing the barriers created by substance use. Students who might benefit from this group include: •students whose use of alcohol and/or drugs is interfering with academic performance, work performance, and/or their relationships •students who drink/use for a “pick me up”, out of boredom, because of stress, or to fit in with others •students who experience negative consequences from use, including regretting their actions after using, blacking out, getting into fights, getting angry or embarrassed when others bring up their drinking/use.
Weekly check in appointments with professional counselor Advocating for students as needed Staying current with community resources
Our meetings are aimed at creating a community of peers that can provide support, encouragement, and understanding on a student in recovery’s unique struggles.
Our program is new, and just growing. The students benefit from mutual support, and knowing they have access to mental health services, support from the institution in their recovery. We have 4 AA meetings and 1 Open Recovery Meeting so far.
Students in recovery find support and social opportunities on campus that are drug and alcohol free through peer meetings, advocacy efforts, and participation in sober campus events.
Currently, the program is not operating, as the few students who have been appropriate are not maintaining consistent communication.
By creating a safe environment where students can fully experience college life without having to resort to getting high or drunk.
12-step program (AA) offered on campus. Sober social events for the campus community. Peer mentoring made available for students new to recovery.
As we are in the early stages of development, we are working to offer a safe environment for students to meet and gather in between classes. We are working to development awareness events to help break the stigma of seeking support services.

## 2017 Census and Definitions for Recovery Support in Higher Education

How services and resources help students stay alcohol and drug free
Through providing recovery-centered programming, social opportunities, and mutual peer support, members gain and maintain emotional and physical sobriety. This complements the 12-step programs that members of the student recovery group participate in.
We help them create and maintain a supportive network both on and of campus.
We currently have an all-recovery meeting and a few sober events per semester.
Support for students
Peer support
Sober activities and engaging with community services
We have 2 recovery meetings a week and have regular sober alternative events.
While our program is new, we are currently providing resources and community to assist students to remain sober during their time at our university.
Weekly check-in meetings, Use of 12 steps and SMART Recovery
The OCR helps students remain substance free by providing therapeutic and wellness support on-campus as well as off-campus. This support includes study groups, peer mentors, structured activities, study groups, wellness group, etc.
Our program offers students a safe, sober space to socialize, work on homework, or relax. We plan multiple fun, sober activities for the students thought the year. Our program also hosts weekly open recovery meetings on campus.
The program is a central connection for students to establish social support from their peers in recovery, and provides opportunities for mutual aid groups where students can openly talk about their challenges and successes. The program includes access to free one-on-one meetings with a Recovery Coach for students to set goals and overcome obstacles for their recovery, and free one-on-one Wellness Coaching for students looking to make other health behavior changes.
Drop in center, all recovery meetings, recovery group and counseling support to be offered beginning 1/2018 with hiring of our CRP Counselor
Our program allows for the existence of a safe space for students in, seeking, and/or contemplating recovery from drugs, alcohol, eating disorders, and/or mental health concerns. By having the Serenity Place open during both early and later hours, it helps students with all kinds of schedules to actively participate in a healthy recovery.
Recovery support services as needed.
We are just starting. We are working on networking and engaging campus support and community support. We have 2 self help groups, one is Refuge Recovery the other is a coping skills group.
Peer to peer support, provide a weekly support group meeting Provide safe environment for social activities. Organize social events for members of the recovery community Work in collaboration with Counseling and Mental Health to help students develop a recovery plan URC Coordinator has a monthly check-in meeting with each member
Currently don't have any students so we don't know how to help them.
Currently, we have a student organization that hosts meetings, has organized awareness and other events (yoga/movies), and assisted with donation drives for community-based organizations.

## 2017 Census and Definitions for Recovery Support in Higher Education

How services and resources help students stay alcohol and drug free
Helps students stay drug free by providing connections to resources as well as providing sober fun activities for students. The support, group time and activities are based off of attendees' interest and feedback. It is an opportunity for community, connection, and fun.
Mutual aid and support peer support
Weekly SMART recovery group on campus Host on and off campus sober events Peer support to access off campus 12 step groups Groupme app for recovering students to provide peer support/relapse prevention.
The Collegiate Recovery Program is a student-led recovery program that provides recovery supports services for students in recovery with a focus on substance abuse. Students who have undergone facilitation training run weekly recovery meetings on campus, plan sober social activities for students, and provide recovery information at various campus events.
The services and resources provide a community for students in recovery which allows them to socialize and interact with others in a way that avoids substances.
This is an organization on our campus that offers end to end recovery support services for students struggling with substance use disorder as well as other co-occurring mental illnesses. The underlying rhetoric driving the community is identity realignment amongst its members and the desire to grow characterized through incremental change, made possible by sharing experiences. Our organization takes it a step further by demonstrating that it is possible to live a completely sober life on a college campus through engaging, fun and healthy activities (both on and off campus).
We work with students on their recovery efforts. We support and connect student with appropriate resources when needed. We offer personal counseling for students in recovery.
Facilitates peer support case management.
We connect students to a network of peers in recovery, faculty/staff/alumni and community coaches and sponsors, host community 12 step meetings as well as our own workshops, engage in the social life of the university, train student allies in stigma reduction, and provide a 24/7 dedicated space for students in recovery that includes amenities (cable TV, coffee maker, fridge/freezer, microwave, bathroom, printer, furniture, white boards, xBox360) for a social and academic "home base" environment near the center of campus.
Our CRP hosts two recovery meetings a week and offers individual support to students as well.
We have quiet rooms and counseling open Mon-Fri 9am-7pm. We have AA meetings through the week and house a SIR club.
We provide a peer-support community, a supportive staff, a place to meet, recovery housing, and recovery programming.
Peer support with like minded students. Relapse prevention programming, counseling, mutual aid groups, recovery housing, lounge space, resource center.
Provides a safe space for meetings seminars, peer support, faculty support, referrals for treatment.
By providing social, clinical, peer, and academic support to students interested in recovery.
Has a strong, large community, groups, counseling, trained professionals assisting as well as peers helping out.
We have a sober living environment with a lot of support.
It's an environment that supports the growth of people in recovery, much like a greenhouse. It has all the things people in recovery need, but it is ultimately up to the people in the house to determine whether they want to stay sober or not. There is a lot of freedom here, most thrive here. We offer counseling, on campus meetings, and many group activities.

## 2017 Census and Definitions for Recovery Support in Higher Education

### How services and resources help students stay alcohol and drug free

Counseling, provide recovery support groups and activities, Recovery Housing, therapy for co-occurring disorders.

The Collegiate Recovery Community is for students who have made a commitment to lead sober, healthy lives. The Collegiate Recovery Community provides an environment where students recovering from addiction can find peer support as well as other recovery support services while navigating their own college experience.

We have four main ingredients that make it a special place: A community of students in recovery from addiction: All ages and academic levels are welcome, from traditional undergraduates to non-traditional, graduate and professional students. Students at other area schools are also welcome at our meetings. Recovery-supportive programming: Programming includes student-organized and student-led peer support group meetings (some of which are 12-Step), as well as sober social activities, service opportunities and educational programming. We are always open to student suggestions for new meetings. A dedicated space: We are your safe place as a student in recovery. The students and staff here get recovery because they live it. We are open 10 a.m. – 6 p.m. weekdays and later when we have evening meetings. Stop by any time to use our dedicated meditation room or study room, check out a book from our library or just to hang out. Some meetings meet year-round, while others meet only when classes are in session. Check out the schedule for more information. Committed people: We are run by full-time staff members and part-time student assistants who are knowledgeable about recovery resources on and off campus. We're here to link you to resources and help you get the support you need. Call us, email us, or just stop by. If you need help right now, please check out the resources on the I Need Help page.

The modalities of Brief Motivational Interviewing, 12-Step Yoga Recovery, and Peer Recovery Coaching will be utilized along with on-campus hosting of Alcoholics Anonymous, Al-Anon, and Overeaters Anonymous groups. These interventions in conjunction with an array of fun, sober activities reflecting a wholesome college experience represent our composite approach.

We fully embrace students in recovery from substance misuse and co-occurring mental health disorders. We have on campus support groups. Access to free and unlimited session counseling. We offer sober activities and events. 24 hour space access to members which includes prayer/meditation room, group room and private study space.

By offering 12-step meetings, recovery housing, peer support, staff support, recovery related activities on campus (i.e., recovery tailgating, outdoor adventure learning experiences, monthly community gatherings).

Network of students in recovery on campus, peer support, weekly events, group text, student leaders.

Has a strong, large community, groups, counseling, trained professionals assisting as well as peers helping out.

We offer 4 weekly recovery meetings in addition to having extensive drop in hours for students who need a safe place to go and access support. We have a full-time staff member who is a Licensed Chemical Dependency Counselor so students are able to get professional support as well as peer support from the other students in recovery. Additionally, we have a student organization that allows students in recovery to be active participants in campus events and we host a wide variety of sober events such as holiday parties, movie nights, sober tailgating and coin night to recognize student's sobriety time.

Students in recovery have priority access to substance-free housing and the substance-free program house. We have a clinician facilitate a weekly group. Students have special access to academic advising and support. There is a new student activities club called SoBear and they have substance-free event most weekends open to anyone who is not using substances. The integrity of the substance-free space is strictly maintained.

Support groups.

Though we currently don't have a requirement to be involved, we encourage students to form connections with one another and build healthy relationships to stay substance free.

Accountability from the peers, access to counseling on campus and referrals for providers off campus, students can select to be drug tested in our Health Center but are not required to as a criteria to attend the Recovery Group.

## 2017 Census and Definitions for Recovery Support in Higher Education

How services and resources help students stay alcohol and drug free
Most students attend 12-step meetings, but not all have found sobriety that way. Mentoring and service work are integral parts of how we keep sober. Strong community and a feeling of ownership by giving students a voice in what is done and who leads these efforts.
Mutual peer recovery support, access to staff and counseling staff for assistance, sober activities.
We are a student organization that provides social peer support and organizes (with our office's help) events and things to do on week-ends. We also have a Friday night AA meeting that is very popular. Staying busy and making a network of sober friends is what helps students stay substance free.
We welcome individuals who are in recovery, who seek recovery, and who identify as recovery allies. We offer peer support for individuals seeking recovery from mental health and/or substance use conditions. We offer peer led groups, peer meetings, events and activities. We do not provide therapeutic counseling at the center, however we are connected to University Health and Counseling to provide this service. We provide a safe, comfortable peer to peer atmosphere to support students as they achieve their academic goals. Students can drop in any time to check in with a peer, another student or staff to make a connection or seek support when things become stressful. We invite students to share their skills and knowledge to help others and/or provide groups based on their passions and pathway to recovery.
"[We] have a tight bond, we look out for each other, we are available for our friends in recovery 24/7, no matter what."
Supportive Community -Visibility and value of seeing students in recovery as a valued entity on the college campus -Resource to students struggling in sobriety -Academic support -Connections to Student Health and Counseling -Connections to other mental, physical and spiritual Health issues.
We work to develop and support a community of students, at varying stages of recovery, in their ongoing sobriety and academic pursuits. To do this, we provide individual recovery plans and individual coaching for any student, group support and education/skills workshops, and sober coaching services, partnerships with local clinicians and abstinence verification resources as a protective and supportive measure.
Our program is based on peer-support. Our students hold each other accountable to their sobriety. Through weekly meetings, workshops, and seminars, students are provided with tools to maintain their sobriety.
Offers an open door area for students to come for assistance with their SUD that is safe and comfortable. We have quiet rooms and someone is always here.
14 Recovery meetings a week on campus, make recovery fun, peer coaching.
Peer and Staff Recovery Support.
Well-established recovery connections both on campus and off campus, safe space, access to 12-step meetings held on campus.
We aim to provide students a safe and sober place/community to receive support and resources.
Contract with peer support professional program with monitoring an sponsorship.
Our club is breaking down stigmas surrounding any and all behavioral health recovery issues, demonstrating how higher-education and the support and fellowship it provides can aid one's path to recovery.
Provides peer support, connects students with faculty/staff in recovery or with resources on campus they can use. Provides support to students at the technical college who may not have the same services or who are looking to transfer.

## 2017 Census and Definitions for Recovery Support in Higher Education

### How services and resources help students stay alcohol and drug free

We offer peer support groups (12-step and non 12-step), sober activities and events, we offer one on one recovery assessments and recovery planning with a licensed counselor, we have a list of outside resources for groups and meetings all over our metroplex and a phone list of peers, sponsors and other students community members in recovery of all paths. When you come to the center you will meet student workers that are in recovery themselves, the administrative assistant and the program manager (an LCDC, LMSW). The center is a safe space where you will find coffee, tea, snacks, study spaces, group rooms, TVs, meditation cushions, recovery books and crafting supplies. Students are always welcome in the CSR space. Our schedule includes 12 step and non 12 step recovery groups for drugs and alcohol as well as other peer support groups for eating disorders and other addictive behaviors. We also offer yoga, meditation and volunteer opportunities for all students. Our hours are 8-5 Monday-Friday and we also accommodate evening groups and occasional weekend events and workshops.

The program offers ongoing support through peer support meetings, SMART Recovery meetings, NA meetings, and EDA meetings on campus. AA meetings are held off campus. We have a dedicated lounge and meeting space in the student union.

As our organization we aim to provide a supportive community and a path to success by achieving balance in sobriety, education, and emotional well-being. We are welcoming of all people regardless of background, ethnicity, sexuality, and gender. At our functions and educational events, we promote a sober environment by enforcing our three main principles: willingness, honesty, and open mindedness. Through creating a community and fostering relationships we strive to help individuals conceive and maintain a sober lifestyle. Our members believe that by developing this lifestyle we can enthusiastically enjoy our college experience, maintain our sobriety, and feel welcome and included as a full member of the university family.

We provide multiple support group meetings during the week on campus. We provide information about the effects of alcohol and other drugs at campus events.

Every student writes and adheres to an Individualized Recovery Plan each semester. CRC staff help hold students accountable to their plan. Students are required to attend the All Recovery meeting weekly and at least one Wellness Workshop each semester. Individual counseling is also available to CRC students.

We provide a support outlet community members (students, faculty, staff, or alumni) who are in recovery or considering recovery. Spending time and having discussions (and fun) with others who have similar lived experiences helps reinforce the strength and hope of living a full life in recovery. A dedicated staff member can also partner with a student to provide case management and referrals to appropriate support resources.

Weekly support drop-in that is flexible to meet the current students involved; residential life offers sober-free choices for roommates; institutional support from student life and funding from student organization funds.

It does this by providing a safe space for them to discuss freely any challenges they may be having which translates into them receiving support from one another. This support can provide the tools to pick something else instead of drugs or addictive behaviors.

Through peer support and organizational identification.

Gives support to all students. Host events that promote sober fun. Gives presentation on how to help a friend and drink responsibly (for those who are not trying to be sober).

We offer several peer lead support groups over the week, as well as hosting sober events on campus for students. Mostly we function to raise awareness of students in recovery and offer those students support in any way we can.

By pursuing higher education and finding purpose.

This organization has been able to provide a supportive community to help students in recovery stay sober, as well as succeed in their academic life through various on campus resources and peer mentoring.



## 2017 Census and Definitions for Recovery Support in Higher Education

How services and resources help students stay alcohol and drug free
We offer clinical support, a weekly process meeting, a campus AA and NA meeting, sober social events, weekly service opportunities, mentorship opportunities with sober high school students, and advocacy initiatives.
Program is being revised due to hiring a new director and marketing person! Do offer education/prevention groups and court evaluations as needed.
By having a safe and supportive space staffed by peer recovery support specialists.
It offers students alternate activities to engage in and be a student that is specific to sober fun.
NA, AA meetings on campus 16-step meeting on campus, Licensed Counselors Seminars Sober events, Clean Spring break.



### Appendix VI – Additional current service and resource offerings of NASPA respondents

Additional current offerings	TYR codification
Alumni doesn't offer anything besides the connections to counseling center.	Counseling
Chemical Dependency Counseling	Counseling
Mental health counseling	Counseling
Counseling with a licensed adt	Counseling
We mostly just offer counseling.	Counseling
Counseling	Counseling
Mostly counseling	Counseling
Mental health support	Counseling
Mental health services	Counseling
Individual support	Counseling
BASICS	Intervention/prevention
EverFi	Intervention/prevention
Crisis management, resources	Intervention/prevention
Alcoholedu BASICS and Marijuana 101 alcohol assessments	Intervention/prevention
Assessment (asi, URICA). Echug/toke in core class	Intervention/prevention
Screening, prevention programs	Intervention/prevention
Assessment phase	Intervention/prevention
Smart recovery	Mutual aid/peer support
Stages of change group	Mutual aid/peer support
Groups	Mutual aid/peer support
Referral and institutional	Referral
Referral	Referral
Refer students elsewhere for additional support	Referral
We have had a Recovery Fair in which we invite outside groups to share their resource/group.	Referral
Mainly student group driven, optional, drop in type sessions	Student group
Group sessions; prevention team w/ programming	Student group
Currently have a grant for a program that provides support for students in recovery...Much more to be done.	Student group
Options are limited but need is great.	Other
Up to the student whether or not they release information to us, unless it is mandated ( which we rarely do). Very little support reintegrating into community and long term.	
Transportation to off campus groups	Other
In progress	Other
We have almost no on campus trauma and recovery care.	Other
Initiative has been growing over the past few years, Right now there is little institutional buy in and no funds identified explicitly for this community. Community efforts are growing, but fragile.	Other